

Fill in this information to identify your case:

United States Bankruptcy Court for the:

District of South Carolina

Case number (If known): \_\_\_\_\_

Chapter you are filing under:

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

Check if this is an amended filing

Official Form 101

## Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, “Do you own a car,” the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Identify Yourself**

**About Debtor 1:**

**1. Your full name**

Write the name that is on your government-issued picture identification (for example, your driver's license or passport).

Bring your picture identification to your meeting with the trustee.

Keith  
First name  
Andrew  
Middle name  
Wolff  
Last name  
Suffix (Sr., Jr., II, III)

**About Debtor 2 (Spouse Only in a Joint Case):**

**2. All other names you have used in the last 8 years**

Include your married or maiden names.

Wendy  
First name  
VonRecklinghausen Walker  
Middle name  
Wolff  
Last name  
Suffix (Sr., Jr., II, III)

Wendy VonRecklinghausen Walker  
Wendy VonRecklinghausen Wolff  
Wendy Walker Wolff

**3. Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)**

xxx - xx - 3 7 2 4

OR

9 xx - xx - \_\_\_\_\_

xxx - xx - 2 9 5 4

OR

9 xx - xx - \_\_\_\_\_

	<b>About Debtor 1:</b>	<b>About Debtor 2 (Spouse Only in a Joint Case):</b>
<b>4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years</b>  Include trade names and <i>doing business as</i> names	<input checked="" type="checkbox"/> I have not used any business names or EINs.  Business name _____  Business name _____  EIN _____  EIN _____	<input checked="" type="checkbox"/> I have not used any business names or EINs.  Business name _____  Business name _____  EIN _____  EIN _____
<b>5. Where you live</b>  652 4th Avenue North Number Street _____  Surfside Beach SC 29575 City State ZIP Code _____ Horry County County	  <b>If Debtor 2 lives at a different address:</b>  Number Street _____  City State ZIP Code _____ County	
  <b>If your mailing address is different from the one above, fill it in here.</b> Note that the court will send any notices to you at this mailing address.  Number Street _____  P.O. Box _____  City State ZIP Code _____	  <b>If Debtor 2's mailing address is different from yours, fill it in here.</b> Note that the court will send any notices to this mailing address.  Number Street _____  P.O. Box _____  City State ZIP Code _____	
<b>6. Why you are choosing <i>this district</i> to file for bankruptcy</b>  <i>Check one:</i> <input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  <input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)	  <i>Check one:</i> <input checked="" type="checkbox"/> Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.  <input type="checkbox"/> I have another reason. Explain. (See 28 U.S.C. § 1408.)	

**Part 2: Tell the Court About Your Bankruptcy Case**

**7. The chapter of the Bankruptcy Code you are choosing to file under** *Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)). Also, go to the top of page 1 and check the appropriate box.*

Chapter 7  
 Chapter 11  
 Chapter 12  
 Chapter 13

**8. How you will pay the fee**  **I will pay the entire fee when I file my petition.** Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address.

**I need to pay the fee in installments.** If you choose this option, sign and attach the *Application for Individuals to Pay The Filing Fee in Installments* (Official Form 103A).

**I request that my fee be waived** (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the *Application to Have the Chapter 7 Filing Fee Waived* (Official Form 103B) and file it with your petition.

**9. Have you filed for bankruptcy within the last 8 years?**  No  
 Yes. District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number \_\_\_\_\_

**10. Are any bankruptcy cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?**  No  
 Yes.  
Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_  
Debtor \_\_\_\_\_ Relationship to you \_\_\_\_\_  
District \_\_\_\_\_ When \_\_\_\_\_ Case number, if known \_\_\_\_\_

**11. Do you rent your residence?**  No. Go to line 12.  
 Yes. Has your landlord obtained an eviction judgment against you?  
 No. Go to line 12.  
 Yes. Fill out *Initial Statement About an Eviction Judgment Against You* (Form 101A) and file it with this bankruptcy petition.

**Part 3: Report About Any Businesses You Own as a Sole Proprietor**

**12. Are you a sole proprietor of any full- or part-time business?**

A sole proprietorship is a business you operate as an individual, and is not a separate legal entity such as a corporation, partnership, or LLC.

If you have more than one sole proprietorship, use a separate sheet and attach it to this petition.

No. Go to Part 4.

Yes. Name and location of business

E-Bay/JUSTWHATURLOOKING4

Name of business, if any

652 4th Avenue North

Number Street

Surfside Beach

SC

29575

City

State

ZIP Code

*Check the appropriate box to describe your business:*

Health Care Business (as defined in 11 U.S.C. § 101(27A))

Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B))

Stockbroker (as defined in 11 U.S.C. § 101(53A))

Commodity Broker (as defined in 11 U.S.C. § 101(6))

None of the above

**13. Are you filing under Chapter 11 of the Bankruptcy Code and are you a small business debtor?**

For a definition of *small business debtor*, see 11 U.S.C. § 101(51D).

*If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 1116(1)(B).*

No. I am not filing under Chapter 11.

No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy Code.

Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code.

**Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention**

**14. Do you own or have any property that poses or is alleged to pose a threat of imminent and identifiable hazard to public health or safety? Or do you own any property that needs immediate attention?**

*For example, do you own perishable goods, or livestock that must be fed, or a building that needs urgent repairs?*

No

Yes. What is the hazard?

If immediate attention is needed, why is it needed?

Where is the property?

**Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling**

**15. Tell the court whether you have received a briefing about credit counseling.**

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

**About Debtor 1:**

*You must check one:*

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

**I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

**I am not required to receive a briefing about credit counseling because of:**

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**About Debtor 2 (Spouse Only in a Joint Case):**

*You must check one:*

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.**

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

**I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.**

Within 14 days after you file this bankruptcy petition, you **MUST** file a copy of the certificate and payment plan, if any.

**I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.**

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

**I am not required to receive a briefing about credit counseling because of:**

**Incapacity.** I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

**Disability.** My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

**Active duty.** I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

**Part 6: Answer These Questions for Reporting Purposes**

**16. What kind of debts do you have?**

**16a. Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

No. Go to line 16b.  
 Yes. Go to line 17.

**16b. Are your debts primarily business debts?** *Business debts* are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.

No. Go to line 16c.  
 Yes. Go to line 17.

**16c. State the type of debts you owe that are not consumer debts or business debts.**

**17. Are you filing under Chapter 7?**

No. I am not filing under Chapter 7. Go to line 18.

**Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?**

Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors?  
 No  
 Yes

**18. How many creditors do you estimate that you owe?**

<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 25,001-50,000
<input type="checkbox"/> 50-99	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 50,001-100,000
<input type="checkbox"/> 100-199	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> More than 100,000
<input type="checkbox"/> 200-999		

**19. How much do you estimate your assets to be worth?**

<input type="checkbox"/> \$0-\$50,000	<input checked="" type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

**20. How much do you estimate your liabilities to be?**

<input type="checkbox"/> \$0-\$50,000	<input checked="" type="checkbox"/> \$1,000,001-\$10 million	<input type="checkbox"/> \$500,000,001-\$1 billion
<input type="checkbox"/> \$50,001-\$100,000	<input type="checkbox"/> \$10,000,001-\$50 million	<input type="checkbox"/> \$1,000,000,001-\$10 billion
<input type="checkbox"/> \$100,001-\$500,000	<input type="checkbox"/> \$50,000,001-\$100 million	<input type="checkbox"/> \$10,000,000,001-\$50 billion
<input type="checkbox"/> \$500,001-\$1 million	<input type="checkbox"/> \$100,000,001-\$500 million	<input type="checkbox"/> More than \$50 billion

**Part 7: Sign Below**

**For you**

I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.

If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.

If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

/s/ Keith Andrew Wolff

Signature of Debtor 1

Executed on 07/08/2019

MM / DD / YYYY

/s/ Wendy VonRecklinghausen Walker W

Signature of Debtor 2

Executed on 07/08/2019

MM / DD / YYYY

**For your attorney, if you are represented by one**

**If you are not represented by an attorney, you do not need to file this page.**

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Christine E. Brimm

Signature of Attorney for Debtor

Date

07/08/2019

MM / DD / YYYY

Christine E. Brimm

Printed name

Barton Brimm, PA

Firm name

3955 Highway 17 Bypass, Suite D

Number Street

Murrells Inlet

SC

29576

City

State

ZIP Code

Contact phone 8032566582

Email address cbrimm@bartonbrimm.com

SC 6569 / FED 6313

SC

Bar number

State

Fill in this information to identify your case:

Debtor 1 **Keith Andrew Wolff**  
First Name Middle Name Last Name  
Debtor 2 **Wendy VonRecklinghausen Walker Wolff**  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of South Carolina

Case number **(If known)**

Check if this is an amended filing

## Official Form 106Sum

### Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

#### Part 1: Summarize Your Assets

<b>Your assets</b>	
Value of what you own	
1. <i>Schedule A/B: Property</i> (Official Form 106A/B)	
1a. Copy line 55, Total real estate, from <i>Schedule A/B</i> .....	\$ <u>1,398,600.00</u>
1b. Copy line 62, Total personal property, from <i>Schedule A/B</i> .....	\$ <u>78,511.62</u>
1c. Copy line 63, Total of all property on <i>Schedule A/B</i> .....	<u>\$ 1,477,111.62</u>

#### Part 2: Summarize Your Liabilities

<b>Your liabilities</b>	
Amount you owe	
2. <i>Schedule D: Creditors Who Have Claims Secured by Property</i> (Official Form 106D)	
2a. Copy the total you listed in Column A, <i>Amount of claim</i> , at the bottom of the last page of Part 1 of <i>Schedule D</i> .....	\$ <u>589,499.66</u>
3. <i>Schedule E/F: Creditors Who Have Unsecured Claims</i> (Official Form 106E/F)	
3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of <i>Schedule E/F</i> .....	\$ <u>596,975.38</u>
3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of <i>Schedule E/F</i> .....	<u>+ \$ 751,867.50</u>
<b>Your total liabilities</b>	
	<u>\$ 1,938,342.54</u>

#### Part 3: Summarize Your Income and Expenses

4. <i>Schedule I: Your Income</i> (Official Form 106I)	
Copy your combined monthly income from line 12 of <i>Schedule I</i> .....	\$ <u>2,493.58</u>
5. <i>Schedule J: Your Expenses</i> (Official Form 106J)	
Copy your monthly expenses from line 22c of <i>Schedule J</i> .....	\$ <u>7,376.04</u>

Debtor 1

Keith Andrew Wolff

First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 4: Answer These Questions for Administrative and Statistical Records****6. Are you filing for bankruptcy under Chapters 7, 11, or 13?**

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.  
 Yes

**7. What kind of debt do you have?**

**Your debts are primarily consumer debts.** *Consumer debts* are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.

**Your debts are not primarily consumer debts.** You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

**8. From the *Statement of Your Current Monthly Income*:** Copy your total current monthly income from Official Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.

\$ \_\_\_\_\_

**9. Copy the following special categories of claims from Part 4, line 6 of *Schedule E/F*:****Total claim****From Part 4 on *Schedule E/F*, copy the following:**

9a. Domestic support obligations (Copy line 6a.)	\$ 0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$ 591,918.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$ 0.00
9d. Student loans. (Copy line 6f.)	\$ 0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$ 0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+ \$ 0.00
<b>9g. Total.</b> Add lines 9a through 9f.	\$ 591,918.00

Debtor 1	Keith Andrew Wolff	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Wendy VonRecklinghausen Walker Wolff	
	First Name	Middle Name
United States Bankruptcy Court for the: District of South Carolina		
Case number		

Check if this is an amended filing

## Official Form 106A/B

### Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Describe Each Residence, Building, Land, or Other Real Estate You Own or Have an Interest In

##### 1. Do you own or have any legal or equitable interest in any residence, building, land, or similar property?

No. Go to Part 2.

Yes. Where is the property?

1.1. 652 4th Avenue North

Street address, if available, or other description

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property? Current value of the portion you own?**

\$ 357,900.00      \$ 357,900.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Fee simple

Check if this is community property

Myrtle Beach      SC      29575

City      State      ZIP Code

**Who has an interest in the property?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

If you own or have more than one, list here:

1.2. 714 Myrtle Drive North

Street address, if available, or other description

**What is the property?** Check all that apply.

- Single-family home
- Duplex or multi-unit building
- Condominium or cooperative
- Manufactured or mobile home
- Land
- Investment property
- Timeshare
- Other \_\_\_\_\_

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*:

**Current value of the entire property? Current value of the portion you own?**

\$ 269,600.00      \$ 269,600.00

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Fee simple

Check if this is community property (see instructions)

Myrtle Beach      SC      29575

City      State      ZIP Code

**Who has an interest in the property?** Check one.

- Debtor 1 only
- Debtor 2 only
- Debtor 1 and Debtor 2 only
- At least one of the debtors and another

**Other information you wish to add about this item, such as local property identification number:**

Horry County

County

Fill in this information to identify your case and this filing:

Debtor 1 Keith Andrew Wolff  
First Name Middle Name Last Name  
Debtor 2 Wendy VonRecklinghausen Walker Wolff  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the: District of South Carolina

Case number \_\_\_\_\_

**Part 1: Continuation Sheet**

1.3 1023 Plantation Court

Street address, if available, or other description

**What is the property?** Check all that apply.

Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property? \$ 414,200.00** **Current value of the portion you own? \$ 414,200.00**

Mount Pleasant SC 29464  
City State ZIP Code

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Fee simple

**Check if this is community property (see instructions)**

Charleston County  
County

**Other information you wish to add about this item, such as local property identification number:**

1.4 212 N. Dogwood Drive

Street address, if available, or other description

**What is the property?** Check all that apply.

Single-family home  
 Duplex or multi-unit building  
 Condominium or cooperative  
 Manufactured or mobile home  
 Land  
 Investment property

Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property.

**Current value of the entire property? \$ 356,900.00** **Current value of the portion you own? \$ 356,900.00**

Myrtle Beach SC 29575  
City State ZIP Code

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

**Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.**

Fee simple

**Check if this is community property (see instructions)**

Horry County  
County

**Other information you wish to add about this item, such as local property identification number:**

1. _____	<b>What is the property?</b> Check all that apply.	Do not deduct secured claims or exemptions. Put the amount of any secured claims on <i>Schedule D: Creditors Who Have Claims Secured by Property</i> .	
Street address, if available, or other description _____	<input type="checkbox"/> Single-family home <input type="checkbox"/> Duplex or multi-unit building <input type="checkbox"/> Condominium or cooperative <input type="checkbox"/> Manufactured or mobile home <input type="checkbox"/> Land <input type="checkbox"/> Investment property <input type="checkbox"/> Timeshare <input type="checkbox"/> Other _____	Current value of the entire property?	Current value of the portion you own?
City _____ State _____ ZIP Code _____	\$ _____ \$ _____		
County _____	<b>Describe the nature of your ownership interest (such as fee simple, tenancy by the entireties, or a life estate), if known.</b> _____		
<b>Who has an interest in the property?</b> Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> <b>Check if this is community property (see instructions)</b>			
<b>Other information you wish to add about this item, such as local property identification number:</b> _____			
2. Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here. ..... → <span style="border: 1px solid black; padding: 2px;">\$ 1,398,600.00</span>			

## Part 2: Describe Your Vehicles

**Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on *Schedule G: Executory Contracts and Unexpired Leases*.**

### 3. Cars, vans, trucks, tractors, sport utility vehicles, motorcycles

No  
 Yes

3.1. Make: EZ Go  
 Model: Golf Cart

Year: \_\_\_\_\_

Approximate mileage: \_\_\_\_\_

Other information:

Condition: Fair

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 2,594.00 \$ 2,594.00

If you own or have more than one, describe here:

3.2. Make: Chevrolet  
 Model: Silverado  
 Year: 2007  
 Approximate mileage: 148,000

Other information:

Condition: Fair

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

Current value of the entire property? Current value of the portion you own?

\$ 6,811.00 \$ 6,811.00

3.3. Make: Honda  
 Model: Pilot  
 Year: 2012  
 Approximate mileage: 140,000

Other information:

Condition: Fair

3.4. Make: Toyota  
 Model: Camry  
 Year: 2005  
 Approximate mileage: 105,000

Other information:

Condition: Fair

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property? Current value of the portion you own?**

\$8,064.00 \$8,064.00

Check if this is community property (see instructions)

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property? Current value of the portion you own?**

\$4,005.00 \$4,005.00

Check if this is community property (see instructions)

**4. Watercraft, aircraft, motor homes, ATVs and other recreational vehicles, other vehicles, and accessories**

Examples: Boats, trailers, motors, personal watercraft, fishing vessels, snowmobiles, motorcycle accessories

No  
 Yes

4.1. Make: Aqua Sport  
 Model: 21 Foot DC  
 Year: 1997

Other information:

Condition: Poor; Does not run;  
 Mileage:

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property? Current value of the portion you own?**

\$2,500.00 \$2,500.00

Check if this is community property (see instructions)

If you own or have more than one, list here:

4.2. Make: \_\_\_\_\_  
 Model: \_\_\_\_\_  
 Year: \_\_\_\_\_  
 Other information:

Condition:

**Who has an interest in the property?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

Do not deduct secured claims or exemptions. Put the amount of any secured claims on *Schedule D: Creditors Who Have Claims Secured by Property*.

**Current value of the entire property? Current value of the portion you own?**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

Check if this is community property (see instructions)

5. Add the dollar value of the portion you own for all of your entries from Part 2, including any entries for pages you have attached for Part 2. Write that number here

→ \$23,974.00

**Part 3: Describe Your Personal and Household Items**

**Do you own or have any legal or equitable interest in any of the following items?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**6. Household goods and furnishings**

Examples: Major appliances, furniture, linens, china, kitchenware

No

Contents of attic, Household Goods and Furnishings

Yes. Describe.....

\$ 5,090.00

**7. Electronics**

Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games

No

Electronics

Yes. Describe.....

\$ 709.00

**8. Collectibles of value**

Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles

No

Yes. Describe.....

\$ 0.00

**9. Equipment for sports and hobbies**

Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments

No

Sports Equipment

Yes. Describe.....

\$ 410.00

**10. Firearms**

Examples: Pistols, rifles, shotguns, ammunition, and related equipment

No

Yes. Describe.....

\$ 0.00

**11. Clothes**

Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories

No

Clothing

Yes. Describe.....

\$ 548.00

**12. Jewelry**

Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver

No

Jewelry, Jewelry

Husband - Rolex (\$2,000); wedding ring (\$250)

Wife - Rolex (\$1,500); costume/misc. (\$172)

\$ 5,622.00

**13. Non-farm animals**

Examples: Dogs, cats, birds, horses

No

2 Cats; 1 Hound Dog; 1 Cockapoo

Yes. Describe.....

\$ 10.00

**14. Any other personal and household items you did not already list, including any health aids you did not list**

No

Yes. Give specific information.....

\$ 0.00

**15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here**

\$ 12,389.00

**Part 4: Describe Your Financial Assets**

**Do you own or have any legal or equitable interest in any of the following?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**16. Cash**

*Examples:* Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition

No

Yes..... Cash: ..... \$ 1,100.00

**17. Deposits of money**

*Examples:* Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each.

No

Yes..... Institution name:

17.1. Checking account:	McGraw Hill #5511	\$ 1,730.01
17.2. Checking account:	Wells Fargo #2460 (with daughter "A") (A's balance \$209)	\$ 0.00
17.3. Savings account:	Bank of America #2473	\$ 47.25
17.4. Savings account:		\$
17.5. Certificates of deposit:		\$
17.6. Other financial account:	Wells Fargo #7445	\$ 517.00
17.7. Other financial account:	Wells Fargo #6778 (joint with son) (son's balance \$206)	\$ 0.00
17.8. Other financial account:	Bank of America #0043	\$ 710.88
17.9. Other financial account:		\$

**18. Bonds, mutual funds, or publicly traded stocks**

*Examples:* Bond funds, investment accounts with brokerage firms, money market accounts

No

Yes.....

Institution or issuer name:

Fidelity custodial account F/B/O Daughter (value .01) #7002	\$ 0.00
Fidelity #6987	\$ 1,507.06
	\$

**19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture**

No

Yes. Give specific information about them. ....

Name of entity:

Salt Water Creek Cafe, LLC	% of ownership:	100 % \$ 0.00
	%	\$
	%	\$

**20. Government and corporate bonds and other negotiable and non-negotiable instruments**

*Negotiable instruments* include personal checks, cashiers' checks, promissory notes, and money orders.

*Non-negotiable instruments* are those you cannot transfer to someone by signing or delivering them.

No

Yes. Give specific information about them. ....

Issuer name:

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

**21. Retirement or pension accounts**

*Examples:* Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans

No

Yes. List each account separately. Institution name:

Type of account:

401(k) or similar plan: \_\_\_\_\_ \$ \_\_\_\_\_  
Pension plan: Fidelity IRA #5510 \_\_\_\_\_ \$ 6,326.93  
IRA: Fidelity IRA #0235 \_\_\_\_\_ \$ 37.98  
Retirement account: \_\_\_\_\_ \$ \_\_\_\_\_  
Keogh: \_\_\_\_\_ \$ \_\_\_\_\_  
Additional account: Fidelity IRA #9881 \_\_\_\_\_ \$ 3,535.72  
Additional account: \_\_\_\_\_ \$ \_\_\_\_\_

**22. Security deposits and prepayments**

Your share of all unused deposits you have made so that you may continue service or use from a company

*Examples:* Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others

No

Yes..... Institution name or individual:

Electric: \_\_\_\_\_ \$ \_\_\_\_\_  
Gas: \_\_\_\_\_ \$ \_\_\_\_\_  
Heating oil: \_\_\_\_\_ \$ \_\_\_\_\_  
Rental unit: \_\_\_\_\_ \$ \_\_\_\_\_  
Prepaid rent: \_\_\_\_\_ \$ \_\_\_\_\_  
Telephone: \_\_\_\_\_ \$ \_\_\_\_\_  
Water: \_\_\_\_\_ \$ \_\_\_\_\_  
Rented furniture: \_\_\_\_\_ \$ \_\_\_\_\_  
Other: retainer w attorney Munden (held for debtors' benefit, paid by debtor's parents - balance \$2800) \_\_\_\_\_ \$ 0.00

**23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years)**

No

Yes..... Issuer name and description:

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

**24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program.**

26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

No

Yes ..... Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

**25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit**

No

Yes. Give specific information about them. ..

\_\_\_\_\_ \$ 0.00

**26. Patents, copyrights, trademarks, trade secrets, and other intellectual property**

Examples: Internet domain names, websites, proceeds from royalties and licensing agreements

No

Yes. Give specific information about them. ..

\_\_\_\_\_ \$ 0.00

**27. Licenses, franchises, and other general intangibles**

Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses

No

Yes. Give specific information about them. ..

\_\_\_\_\_ \$ 0.00

**Money or property owed to you?**

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**28. Tax refunds owed to you**

No

Yes. Give specific information about them, including whether you already filed the returns and the tax years. .....

\_\_\_\_\_

Federal: \$ 0.00  
State: \$ 0.00  
Local: \$ 0.00

**29. Family support**

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

No

Yes. Give specific information. .....

\_\_\_\_\_

Alimony: \$ 0.00  
Maintenance: \$ 0.00  
Support: \$ 0.00  
Divorce settlement: \$ 0.00  
Property settlement: \$ 0.00

**30. Other amounts someone owes you**

Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else

No

Yes. Give specific information. .....

Salt Water Creek Cafe, LLC  
\_\_\_\_\_ \$ Unknown

**31. Interests in insurance policies**

Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance

No

Yes. Name the insurance company      Company name:  
of each policy and list its value. ....

USAA Term Life

Northwest Mutual Whole Life (loan against, see Sch D)

Beneficiary:

Keith Wolff

Surrender or refund value:

\$ 0.00

\$ 24,535.79

\$

**32. Any interest in property that is due you from someone who has died**

If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died.

No

Yes. Give specific information. ....

\$ 0.00

**33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment**

Examples: Accidents, employment disputes, insurance claims, or rights to sue

No

Yes. Describe each claim. ....

\$ 0.00

**34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims**

No

Yes. Describe each claim. ....

\$ 0.00

**35. Any financial assets you did not already list**

No

Yes. Give specific information. ....

\$ 0.00

**36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached for Part 4. Write that number here** →

\$ 40,048.62

**Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1.**

**37. Do you own or have any legal or equitable interest in any business-related property?**

No. Go to Part 6.

Yes. Go to line 38.

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**38. Accounts receivable or commissions you already earned**

No

Yes. Describe. ....

\$ 0.00

**39. Office equipment, furnishings, and supplies**

Examples: Business-related computers, software, modems, printers, copiers, fax machines, rugs, telephones, desks, chairs, electronic devices

No

Yes. Describe. ....

\$ 0.00

**40. Machinery, fixtures, equipment, supplies you use in business, and tools of your trade**

No

Yes. Describe.....

\$ 0.00

**41. Inventory**

No

Yes. Describe..... E-Bay Inventory - Debtor and friend paid approx \$4200.00 for inventory - Debtor's interest is half

\$ 2,100.00

**42. Interests in partnerships or joint ventures**

No

Yes. Describe..... Name of entity:

% of ownership:

\_\_\_\_\_ % \$ \_\_\_\_\_  
\_\_\_\_\_ % \$ \_\_\_\_\_  
\_\_\_\_\_ % \$ \_\_\_\_\_

**43. Customer lists, mailing lists, or other compilations**

No

Yes. Do your lists include personally identifiable information (as defined in 11 U.S.C. § 101(41A))?

No

Yes. Describe.....

\$ 0.00

**44. Any business-related property you did not already list**

No

Yes. Give specific information .....

\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_  
\_\_\_\_\_ \$ \_\_\_\_\_

**45. Add the dollar value of all of your entries from Part 5, including any entries for pages you have attached for Part 5. Write that number here** →

\$ 2,100.00

**Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.**

**46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?**

No. Go to Part 7.

Yes. Go to line 47.

**Current value of the portion you own?**

Do not deduct secured claims or exemptions.

**47. Farm animals**

Examples: Livestock, poultry, farm-raised fish

No

Yes.....

\$ \_\_\_\_\_

48. Crops—either growing or harvested

No

Yes. Give specific information. ....

\$ \_\_\_\_\_

49. Farm and fishing equipment, implements, machinery, fixtures, and tools of trade

No

Yes. ....

\$ \_\_\_\_\_

50. Farm and fishing supplies, chemicals, and feed

No

Yes. ....

\$ \_\_\_\_\_

51. Any farm- and commercial fishing-related property you did not already list

No

Yes. Give specific information. ....

\$ \_\_\_\_\_

52. Add the dollar value of all of your entries from Part 6, including any entries for pages you have attached for Part 6. Write that number here ..... →

\$ 0.00

**Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above**

53. Do you have other property of any kind you did not already list?

Examples: Season tickets, country club membership

No

Yes. Give specific information. ....

54. Add the dollar value of all of your entries from Part 7. Write that number here ..... →

\$ 0.00

**Part 8: List the Totals of Each Part of this Form**

55. Part 1: Total real estate, line 2 ..... →

\$ 1,398,600.00

56. Part 2: Total vehicles, line 5 \$ 23,974.00

57. Part 3: Total personal and household items, line 15 \$ 12,389.00

58. Part 4: Total financial assets, line 36 \$ 40,048.62

59. Part 5: Total business-related property, line 45 \$ 2,100.00

60. Part 6: Total farm- and fishing-related property, line 52 \$ 0.00

61. Part 7: Total other property not listed, line 54 + \$ 0.00

62. Total personal property. Add lines 56 through 61. .... →

\$ 78,511.62

Copy personal property total → + \$ 78,511.62

63. Total of all property on Schedule A/B. Add line 55 + line 62. ....

\$ 1,477,111.62

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (if known)			

Check if this is an amended filing

Official Form 106C

**Schedule C: The Property You Claim as Exempt**

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

**Part 1: Identify the Property You Claim as Exempt**

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Debtor 1 Exemptions		Check only one box for each exemption	
Brief description: 652 4th Avenue North	\$ 357,900.00	<input checked="" type="checkbox"/> \$ 55,875.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from <i>Schedule A/B</i> : 1.1 Brief description: EZ Go Golf Cart	\$ 2,594.00	<input checked="" type="checkbox"/> \$ 1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(7)
Line from <i>Schedule A/B</i> : 3.1 Brief description: 2007 Chevrolet Silverado	\$ 6,811.00	<input checked="" type="checkbox"/> \$ 6,100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(2)

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
2012 Honda Pilot Brief description: Line from Schedule A/B: 3.3	\$ 8,064.00	<input checked="" type="checkbox"/> \$ 600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(7)
2005 Toyota Camry Brief description: Line from Schedule A/B: 3.4	\$ 4,005.00	<input checked="" type="checkbox"/> \$ 1,650.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(7)
Household goods - Household Goods and Furnishings Brief description: Line from Schedule A/B: 6	\$ 4,490.00	<input checked="" type="checkbox"/> \$ 2,245.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Household goods - Contents of attic Brief description: Line from Schedule A/B: 6	\$ 600.00	<input checked="" type="checkbox"/> \$ 300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Electronics - Electronics Brief description: Line from Schedule A/B: 7	\$ 709.00	<input checked="" type="checkbox"/> \$ 354.50 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Sports and hobby equipment - Sports Equipment Brief description: Line from Schedule A/B: 9	\$ 410.00	<input checked="" type="checkbox"/> \$ 205.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Clothing - Clothing Brief description: Line from Schedule A/B: 11	\$ 548.00	<input checked="" type="checkbox"/> \$ 274.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Jewelry - Jewelry Brief description: Husband - Rolex (\$2,000); wedding ring (\$250) Wife - Rolex (\$1,500); costume/misc (\$172)	\$ 3,922.00	<input checked="" type="checkbox"/> \$ 500.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(7)
Jewelry - Jewelry Brief description: Husband - Rolex (\$2,000); wedding ring (\$250) Wife - Rolex (\$1,500); costume/misc (\$172)	\$ 3,922.00	<input checked="" type="checkbox"/> \$ 1,225.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(4)
Cash (Cash On Hand) Brief description: Line from Schedule A/B: 12	\$ 1,100.00	<input checked="" type="checkbox"/> \$ 550.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
McGraw Hill #5511 (Checking) Brief description: Line from Schedule A/B: 16	\$ 1,730.01	<input checked="" type="checkbox"/> \$ 865.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Bank of America #2473 (Savings) Brief description: Line from Schedule A/B: 17.1	\$ 47.25	<input checked="" type="checkbox"/> \$ 23.63 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from Schedule A/B: 17.3			

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Wells Fargo #7445 (Checking) Brief description:	\$ 517.00	<input checked="" type="checkbox"/> \$ 258.50 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from Schedule A/B: 17.6 Brief description:	\$ 710.88	<input checked="" type="checkbox"/> \$ 149.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from Schedule A/B: 17.8 Brief description:	\$ 1,507.06	<input checked="" type="checkbox"/> \$ 753.53 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from Schedule A/B: 18 Brief description:	\$ 37.98	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(13)
Line from Schedule A/B: 21 Brief description:	\$ 6,326.93	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(13)
Line from Schedule A/B: 21 Brief description:	\$ 3,535.72	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(13)
Line from Schedule A/B: 21 Brief description:	\$ 24,535.79	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 38-63-40 (A)
Line from Schedule A/B: 31 Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Fill in this information to identify your case:

Debtor 1	First Name	Middle Name	Last Name
Debtor 2	Wendy VonRecklinghausen Walker Wolff		
(Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (if known)			

Check if this is an amended filing

## Official Form 106C

### Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

#### Part 1: Identify the Property You Claim as Exempt

1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.

You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)  
 You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)

2. For any property you list on *Schedule A/B* that you claim as exempt, fill in the information below.

Brief description of the property and line on <i>Schedule A/B</i> that lists this property	Current value of the portion you own	Amount of the exemption you claim	Specific laws that allow exemption
Debtor 2 Exemptions		Check only one box for each exemption	
Brief description: 652 4th Avenue North	\$ 357,900.00	<input checked="" type="checkbox"/> \$ 55,875.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from <i>Schedule A/B</i> : 1.1 Brief description: EZ Go Golf Cart	\$ 2,594.00	<input checked="" type="checkbox"/> \$ 1,000.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(7)
Line from <i>Schedule A/B</i> : 3.1 Brief description: 2012 Honda Pilot	\$ 8,064.00	<input checked="" type="checkbox"/> \$ 600.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(7)

3. Are you claiming a homestead exemption of more than \$170,350?

(Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.)

No  
 Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?  
 No  
 Yes

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
2012 Honda Pilot Brief description: Line from Schedule A/B: 3.3	\$ 8,064.00	<input checked="" type="checkbox"/> \$ 6,100.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(2)
2005 Toyota Camry Brief description: Line from Schedule A/B: 3.4	\$ 4,005.00	<input checked="" type="checkbox"/> \$ 1,650.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(7)
Household goods - Household Goods and Furnishings Brief description: Line from Schedule A/B: 6	\$ 4,490.00	<input checked="" type="checkbox"/> \$ 2,245.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Household goods - Contents of attic Brief description: Line from Schedule A/B: 6	\$ 600.00	<input checked="" type="checkbox"/> \$ 300.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Electronics - Electronics Brief description: Line from Schedule A/B: 7	\$ 709.00	<input checked="" type="checkbox"/> \$ 354.50 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Sports and hobby equipment - Sports Equipment Brief description: Line from Schedule A/B: 9	\$ 410.00	<input checked="" type="checkbox"/> \$ 205.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Clothing - Clothing Brief description: Line from Schedule A/B: 11	\$ 548.00	<input checked="" type="checkbox"/> \$ 274.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(3)
Jewelry - Jewelry Brief description: Husband - Rolex (\$2,000); wedding ring (\$250) Wife - Rolex (\$1,500); costume/misc (\$172)	\$ 3,922.00	<input checked="" type="checkbox"/> \$ 1,225.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(4)
Cash (Cash On Hand) Brief description: Line from Schedule A/B: 12	\$ 1,100.00	<input checked="" type="checkbox"/> \$ 550.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
McGraw Hill #5511 (Checking) Brief description: Line from Schedule A/B: 16	\$ 1,730.01	<input checked="" type="checkbox"/> \$ 865.01 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Bank of America #2473 (Savings) Brief description: Line from Schedule A/B: 17.1	\$ 47.25	<input checked="" type="checkbox"/> \$ 23.62 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Wells Fargo #7445 (Checking) Brief description: Line from Schedule A/B: 17.3	\$ 517.00	<input checked="" type="checkbox"/> \$ 258.50 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from Schedule A/B: 17.6			

**Part 2: Additional Page**

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption	Specific laws that allow exemption
Bank of America #0043 (Checking) Brief description:	\$ 710.88	<input checked="" type="checkbox"/> \$ 149.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from Schedule A/B: 17.8 Fidelity #6987 Brief description:	\$ 1,507.06	<input checked="" type="checkbox"/> \$ 753.53 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(1)
Line from Schedule A/B: 18 Fidelity IRA #0235 Brief description:	\$ 37.98	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(13)
Line from Schedule A/B: 21 Fidelity IRA #5510 Brief description:	\$ 6,326.93	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(13)
Line from Schedule A/B: 21 Fidelity IRA #9881 Brief description:	\$ 3,535.72	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(13)
Line from Schedule A/B: 21 Northwest Mutual Whole Life (loan against, see Sch D) Brief description:	\$ 24,535.79	<input type="checkbox"/> \$ _____ <input checked="" type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 38-63-40 (A)
Line from Schedule A/B: 31 E-Bay Inventory - Debtor and friend paid approx \$4200.00 for inventory - Debtor's interest is half Brief description:	\$ 2,100.00	<input checked="" type="checkbox"/> \$ 1,825.00 <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	S.C. Code Ann. § 15-41-30 (A)(6)
Line from Schedule A/B: 41 Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	
Line from Schedule A/B: Brief description:	\$ _____	<input type="checkbox"/> \$ _____ <input type="checkbox"/> 100% of fair market value, up to any applicable statutory limit	

Keith Andrew Wolff and Wendy V. Walker Wolff

Source of Unused Exemptions for Wildcard Exemption:

\$1,000 each unused HHG exemption for Golf Cart.

Remaining Wild Card exemptions use unused homestead.

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Wendy VonRecklinghausen Walker Wolff		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (if known)			

Check if this is an amended filing

Official Form 106D

**Schedule D: Creditors Who Have Claims Secured by Property**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, number the entries, and attach it to this form. On the top of any additional pages, write your name and case number (if known).

**1. Do any creditors have claims secured by your property?**

No. Check this box and submit this form to the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below.

**Part 1: List All Secured Claims**

2. List all secured claims. If a creditor has more than one secured claim, list the creditor separately for each claim. If more than one creditor has a particular claim, list the other creditors in Part 2. As much as possible, list the claims in alphabetical order according to the creditor's name.	Column A <b>Amount of claim</b> Do not deduct the value of collateral.	Column B <b>Value of collateral that supports this claim</b>	Column C <b>Unsecured portion if any</b>
2.1 Bank of America	Describe the property that secures the claim: \$73,358.53	\$356,900.00	\$0.00
Creditor's Name 1207 Highway 17 North	Number Street Myrtle Beach SC 29575	212 N. Dogwood Drive, Myrtle Beach, SC 29575 - \$356,900.00	
As of the date you file, the claim is: Check all that apply.			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Who owes the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred _____			
Last 4 digits of account number _____			
2.2 Bank of America	Describe the property that secures the claim: \$246,372.16	\$357,900.00	\$0.00
Creditor's Name 1207 Highway 17 North	Number Street Myrtle Beach SC 29575	652 4th Avenue North, Myrtle Beach, SC 29575 - \$357,900.00	
of the date you file, the claim is: Check all that apply.			
<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed			
Who owes the debt? Check one.			
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			
<input type="checkbox"/> Check if this claim relates to a community debt			
Date debt was incurred 2003			
Last 4 digits of account number 2227			
Add the dollar value of your entries in Column A on this page. Write that number here: \$319,730.69			

Debtor 1

Keith Andrew Wolff

First Name Middle Name

Last Name

Case number (if known) \_\_\_\_\_

**Additional Page****After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.****Column A**  
**Amount of claim**  
Do not deduct the value of collateral.**Column B**  
**Value of collateral that supports this claim****Column C**  
**Unsecured portion if any****2.3 Northwest Mutual Whole Life**

Describe the property that secures the claim: \$ 5,057.38 \$ 24,535.79 \$ 0.00

Creditor's Name \_\_\_\_\_  
Number Street \_\_\_\_\_  
\_\_\_\_\_

Northwest Mutual Whole Life (loan against, see Sch D) - \$24,535.79

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

**Who owes the debt? Check one.**

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) Life insurance loan

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number 5173**2.4 Select Portfolio Services**

Describe the property that secures the claim: \$ 86,918.91 \$ 414,200.00 \$ 0.00

Creditor's Name \_\_\_\_\_  
P.O. Box 65250  
Number Street \_\_\_\_\_

1023 Plantation Court, Mount Pleasant, SC 29464 - \$414,200.00

Salt Lake City UT 84165  
City State ZIP Code**Who owes the debt? Check one.**

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

Date debt was incurred 1996**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Last 4 digits of account number 8417**2.5 SPS**

Describe the property that secures the claim: \$ 86,918.00 \$ 269,600.00 \$ 0.00

Creditor's Name \_\_\_\_\_  
P.O. Box 65250  
Number Street \_\_\_\_\_

714 Myrtle Drive North, Myrtle Beach, SC 29575 - \$269,600.00

Salt Lake City UT 84165  
City State ZIP Code**Who owes the debt? Check one.**

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

Date debt was incurred \_\_\_\_\_

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Last 4 digits of account number \_\_\_\_\_

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 178,894.29If this is the last page of your form, add the dollar value totals from all pages.  
Write that number here: \$ \_\_\_\_\_

Debtor 1

Keith Andrew Wolff

First Name Middle Name

Last Name

Case number (if known)

**Additional Page****After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.****Column A**  
**Amount of claim**  
Do not deduct the value of collateral.**Column B**  
**Value of collateral that supports this claim****Column C**  
**Unsecured portion**  
If any**2.6** USAA

Describe the property that secures the claim: \$ 90,874.68 \$ 356,900.00 \$ 0.00

Creditor's Name  
9800 Frederickburg Road  
Number Street

212 N. Dogwood Drive, Myrtle Beach, SC 29575 - \$356,900.00

San Antonio TX 78288  
City State ZIP Code**Who owes the debt?** Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another  
 **Check if this claim relates to a community debt**

**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number

Describe the property that secures the claim: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's Name  
Number Street**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number

Describe the property that secures the claim: \$ \_\_\_\_\_ \$ \_\_\_\_\_ \$ \_\_\_\_\_

Creditor's Name  
Number Street**As of the date you file, the claim is:** Check all that apply.

Contingent  
 Unliquidated  
 Disputed

**Nature of lien.** Check all that apply.

An agreement you made (such as mortgage or secured car loan)  
 Statutory lien (such as tax lien, mechanic's lien)  
 Judgment lien from a lawsuit  
 Other (including a right to offset) \_\_\_\_\_

Date debt was incurred \_\_\_\_\_

Last 4 digits of account number

Add the dollar value of your entries in Column A on this page. Write that number here: \$ 90,874.68

If this is the last page of your form, add the dollar value totals from all pages.  
Write that number here: \$ 589,499.66

## Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Wendy VonRecklinghausen Walker Wolff	
	First Name	Middle Name
United States Bankruptcy Court for the: District of South Carolina		
Case number (if known)		

Check if this is an amended filing

## Official Form 106E/F

## Schedule E/F: Creditors Who Have Unsecured Claims

12/15

Be as complete and accurate as possible. Use Part 1 for creditors with PRIORITY claims and Part 2 for creditors with NONPRIORITY claims. List the other party to any executory contracts or unexpired leases that could result in a claim. Also list executory contracts on *Schedule A/B: Property* (Official Form 106A/B) and on *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G). Do not include any creditors with partially secured claims that are listed in *Schedule D: Creditors Who Have Claims Secured by Property*. If more space is needed, copy the Part you need, fill it out, number the entries in the boxes on the left. Attach the Continuation Page to this page. On the top of any additional pages, write your name and case number (if known).

## Part 1: List All of Your PRIORITY Unsecured Claims

## 1. Do any creditors have priority unsecured claims against you?

No. Go to Part 2.  
 Yes.

## 2. List all of your priority unsecured claims. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. If a claim has both priority and nonpriority amounts, list that claim here and show both priority and nonpriority amounts. As much as possible, list the claims in alphabetical order according to the creditor's name. If you have more than two priority unsecured claims, fill out the Continuation Page of Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.

(For an explanation of each type of claim, see the instructions for this form in the instruction booklet.)

		Total claim	Priority amount	Nonpriority amount
2.1	Georgetown County			
	Priority Creditor's Name P.O. Box 421270	Last 4 digits of account number	\$ 2,705.00	\$ 0.00 \$ 2,705.00
	Number Street	When was the debt incurred?		
	Georgetown SC 29442	As of the date you file, the claim is: Check all that apply.		
	City State ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed		
	Who incurred the debt? Check one.	Type of PRIORITY unsecured claim:		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
2.2	Internal Revenue Service	Last 4 digits of account number	\$ 589,213.00	\$ 0.00 \$ 589,213.00
	Priority Creditor's Name Centralized Insolvency Operation	When was the debt incurred?		
	Number Street P.O. Box 7346	As of the date you file, the claim is: Check all that apply.		
	Philadelphia PA 19101-7346	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed		
	City State ZIP Code	Type of PRIORITY unsecured claim:		
	Who incurred the debt? Check one.	<input type="checkbox"/> Domestic support obligations <input checked="" type="checkbox"/> Taxes and certain other debts you owe the government <input type="checkbox"/> Claims for death or personal injury while you were intoxicated <input type="checkbox"/> Other. Specify		
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No Yes			

## Part 1: Your PRIORITY Unsecured Claims – Continuation Page

After listing any entries on this page, number them beginning with 2.3, followed by 2.4, and so forth.				Total claim	Priority amount	Nonpriority amount	
<b>2.3</b>	Northwestern Mutual			Last 4 digits of account number 5173	\$ 5,057.38	\$ 0.00	\$ 5,057.38
Priority Creditor's Name 720 East Wisconsin Avenue Number Street  Milwaukee WI 53202-4797 City State ZIP Code				When was the debt incurred?			
				As of the date you file, the claim is: Check all that apply.			
				<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed	
				<b>Type of PRIORITY unsecured claim:</b>			
				<input type="checkbox"/> Domestic support obligations	<input type="checkbox"/> Taxes and certain other debts you owe the government	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated	
				<input type="checkbox"/> Other. Specify Life Insurance Cash Value			
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				<input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>2.4</b>	South Carolina Dept. of Revenue and Taxation			Last 4 digits of account number	\$ 0.00	\$ 0.00	\$ 0.00
Priority Creditor's Name P.O. Box 12265 Number Street  Columbia SC 29211-9979 City State ZIP Code				When was the debt incurred?			
				As of the date you file, the claim is: Check all that apply.			
				<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed	
				<b>Type of PRIORITY unsecured claim:</b>			
				<input type="checkbox"/> Domestic support obligations	<input checked="" type="checkbox"/> Taxes and certain other debts you owe the government	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated	
				<input type="checkbox"/> Other. Specify			
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another				<input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
				Last 4 digits of account number	\$ _____	\$ _____	\$ _____
Priority Creditor's Name  Number Street  City State ZIP Code				When was the debt incurred?			
				As of the date you file, the claim is: Check all that apply.			
				<input type="checkbox"/> Contingent	<input type="checkbox"/> Unliquidated	<input type="checkbox"/> Disputed	
				<b>Type of PRIORITY unsecured claim:</b>			
				<input type="checkbox"/> Domestic support obligations	<input type="checkbox"/> Taxes and certain other debts you owe the government	<input type="checkbox"/> Claims for death or personal injury while you were intoxicated	
				<input type="checkbox"/> Other. Specify			
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				<input type="checkbox"/> Check if this claim is for a community debt <b>Is the claim subject to offset?</b> <input type="checkbox"/> No <input type="checkbox"/> Yes			

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

Alesco Linen

Total claim

4.1

Nonpriority Creditor's Name  
4921 Chateau Avenue  
Number Street

Last 4 digits of account number

\$ 3,000.00

When was the debt incurred?

North Charleston SC 29405  
City State ZIP Code

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number 0609

\$ 3,201.90

When was the debt incurred? 4/29/19

AmeriGas

Nonpriority Creditor's Name  
3951 Dick Pond Road  
Number Street

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

Last 4 digits of account number 4008

\$ 46,930.31

When was the debt incurred?

American Express

Nonpriority Creditor's Name  
P.O. Box 650448  
Number Street

As of the date you file, the claim is: Check all that apply.

Contingent  
 Unliquidated  
 Disputed

## Type of NONPRIORITY unsecured claim:

Student loans  
 Obligations arising out of a separation agreement or divorce that you did not report as priority claims  
 Debts to pension or profit-sharing plans, and other similar debts  
 Other. Specify Credit Card Debt - Business debt

## Who incurred the debt? Check one.

Debtor 1 only  
 Debtor 2 only  
 Debtor 1 and Debtor 2 only  
 At least one of the debtors and another

 Check if this claim is for a community debt

## Is the claim subject to offset?

No  
 Yes

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.4	Bank of America		
Nonpriority Creditor's Name P.O. Box 15019 Number Street			Last 4 digits of account number 8503 When was the debt incurred? 02/19  <b>As of the date you file, the claim is:</b> Check all that apply.
Wilmington DE 19886-5019 City State ZIP Code			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.5	Bank of America		
Nonpriority Creditor's Name P.O. Box 15019 Number Street			Last 4 digits of account number 0071 When was the debt incurred?
Wilmington DE 19886-5019 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply.
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.6	Bank of America		
Nonpriority Creditor's Name P.O. Box 15019 Number Street			Last 4 digits of account number 5572 When was the debt incurred? 03/19
Wilmington DE 19886-5019 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply.
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.7	Barclay Card Services		
Nonpriority Creditor's Name P.O. Box 8801 Number Street			Last 4 digits of account number 8254 When was the debt incurred? 2016  <b>As of the date you file, the claim is:</b> Check all that apply.
Wilmington DE 19899 City State ZIP Code			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Credit Card Debt
<b>Who incurred the debt?</b> Check one. <input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt			<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
4.8	Cozzini Brothers, Inc.		
Nonpriority Creditor's Name 350 Howard Avenue Number Street			Last 4 digits of account number 46.00 When was the debt incurred?
Des Plaines IL 60018 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply.
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Suppliers and Vendors
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.9	George and Ann Walker		
Nonpriority Creditor's Name 18 Breton Harbors Drive Number Street			Last 4 digits of account number 322,000.00 When was the debt incurred?
Toms River NJ 08753 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply.
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input checked="" type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> Check if this claim is for a community debt			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Personal loan for business needs
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

4.10	Grand Strand Hospital			Total claim
		Nonpriority Creditor's Name	Last 4 digits of account number	
	P.O. Box 740771	0939	\$ 1,250.72	
	Number Street	When was the debt incurred?	6/17	
	Cincinnati OH 45274-0771			
	City State ZIP Code			
<b>Who incurred the debt?</b> Check one.				
<input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.11	Home Depot	Nonpriority Creditor's Name	Last 4 digits of account number	\$ 707.64
	P.O. Box 9001010		When was the debt incurred?	
	Number Street			
	Louisville KY 40290			
	City State ZIP Code			
<b>Who incurred the debt?</b> Check one.				
<input checked="" type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				
4.12	Imagination Athletics	Nonpriority Creditor's Name	Last 4 digits of account number	\$ 213.84
	P.O. Box 2868		When was the debt incurred?	
	Number Street			
	Myrtle Beach SC 29578			
	City State ZIP Code			
<b>Who incurred the debt?</b> Check one.				
<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another				
<input type="checkbox"/> Check if this claim is for a community debt				
<b>Is the claim subject to offset?</b>				
<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes				

**Part 2: List All of Your NONPRIORITY Unsecured Claims****3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			<b>Total claim</b>
<b>4.13</b>	Inland Seafood		
Nonpriority Creditor's Name 3725 N. Davidson Street Number Street			<b>Last 4 digits of account number</b> \$ <u>326.00</u> <b>When was the debt incurred?</b> <u>4/5/19</u>
Charlotte NC 28205 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another			<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify
<b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.14</b>	Lee's Farm		
Nonpriority Creditor's Name 4883 North Highway 17 Number Street			<b>Last 4 digits of account number</b> \$ <u>250.00</u> <b>When was the debt incurred?</b>
Murrells Inlet SC 29576 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another			<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify
<b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
<b>4.15</b>	MUSC Health		
Nonpriority Creditor's Name P.O. Box 931736 Number Street			<b>Last 4 digits of account number</b> <u>0741</u> <b>When was the debt incurred?</b> <u>\$5,001.32</u>
Atlanta GA 31193 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply. <input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input type="checkbox"/> Disputed
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input checked="" type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input type="checkbox"/> At least one of the debtors and another			<b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify <u>Medical Services</u>
<b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

			Total claim
4.16	Performance Food Group		
Nonpriority Creditor's Name 2801 Alex Lee Blvd. Number Street			Last 4 digits of account number 5618 When was the debt incurred? 4/9/19  <b>As of the date you file, the claim is:</b> Check all that apply.
Florence SC 29506 City State ZIP Code			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.17	SESAC		
Nonpriority Creditor's Name P.O. Box 5246 Number Street			Last 4 digits of account number 1,099.92 When was the debt incurred?
New York NY 10008 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply.
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Suppliers and Vendors
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.18	Santee Cooper		
Nonpriority Creditor's Name P.O. Box 188 Number Street			Last 4 digits of account number 1,659.69 When was the debt incurred?
Moncks Corner SC 29461 City State ZIP Code			<b>As of the date you file, the claim is:</b> Check all that apply.
<b>Who incurred the debt?</b> Check one. <input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another  <input type="checkbox"/> <b>Check if this claim is for a community debt</b>			<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed <b>Type of NONPRIORITY unsecured claim:</b> <input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify Utility Services
<b>Is the claim subject to offset?</b> <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 2: List All of Your NONPRIORITY Unsecured Claims**

**3. Do any creditors have nonpriority unsecured claims against you?**

No. You have nothing to report in this part. Submit this form to the court with your other schedules.  
 Yes

**4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim.** If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

## Part 2: List All of Your NONPRIORITY Unsecured Claims

## 3. Do any creditors have nonpriority unsecured claims against you?

No. You have nothing to report in this part. Submit this form to the court with your other schedules.

Yes

## 4. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one nonpriority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3. If you have more than three nonpriority unsecured claims fill out the Continuation Page of Part 2.

	Nonpriority Creditor's Name			Total claim
		Number	Street	
4.22	Wachesaw, LLC			
	Nonpriority Creditor's Name	Last 4 digits of account number		
	1039 44th Avenue North, Suite 203			\$ 261,450.00
	Number Street	When was the debt incurred?		
	Myrtle Beach	SC	29577	As of the date you file, the claim is: Check all that apply.
	City	State	ZIP Code	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	Type of NONPRIORITY unsecured claim:			
	<input type="checkbox"/> Student loans <input type="checkbox"/> Obligations arising out of a separation agreement or divorce that you did not report as priority claims <input type="checkbox"/> Debts to pension or profit-sharing plans, and other similar debts <input checked="" type="checkbox"/> Other. Specify lease on property at 4660 Highway 17 Bypass, Murrells Inlet, SC for business.			
	Who incurred the debt? Check one.			
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.23	Waste Management Co.			
	Nonpriority Creditor's Name	Last 4 digits of account number		\$ 1,620.87
	1001 Fannin Street	When was the debt incurred?		
	Number Street	As of the date you file, the claim is: Check all that apply.		
	Houston	TX	77002	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	City	State	ZIP Code	Type of NONPRIORITY unsecured claim:
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			
4.24	Yesco Myrtle Beach			
	Nonpriority Creditor's Name	Last 4 digits of account number		\$ 545.79
	6511A Dick Pond Road	When was the debt incurred?		
	Number Street	As of the date you file, the claim is: Check all that apply.		
	Myrtle Beach	SC	29588	<input type="checkbox"/> Contingent <input type="checkbox"/> Unliquidated <input checked="" type="checkbox"/> Disputed
	City	State	ZIP Code	Type of NONPRIORITY unsecured claim:
	<input type="checkbox"/> Debtor 1 only <input type="checkbox"/> Debtor 2 only <input type="checkbox"/> Debtor 1 and Debtor 2 only <input checked="" type="checkbox"/> At least one of the debtors and another			
	<input type="checkbox"/> Check if this claim is for a community debt			
	Is the claim subject to offset?			
	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes			

**Part 3: List Others to Be Notified About a Debt That You Already Listed**

5. Use this page only if you have others to be notified about your bankruptcy, for a debt that you already listed in Parts 1 or 2. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the original creditor in Parts 1 or 2, then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Parts 1 or 2, list the additional creditors here. If you do not have additional persons to be notified for any debts in Parts 1 or 2, do not fill out or submit this page.

McClatchy

Name

2100 Q Street

Number Street

Sacramento	CA	95816
City	State	ZIP Code

NPAS, Inc.

Name

P.O. Box 99400

Number Street

Louisville	KY	40269
City	State	ZIP Code

South Carolina Dept of Employment and Workforce

Name

1550 Gadsden Street

Number Street

Columbia	SC	29202
City	State	ZIP Code

United States Dept. of Justice

Name

Civil Trial Section Western Region

Number Street

Box 683 Ben Franklin Station

Washington	DC	20044
City	State	ZIP Code

Name

Number Street

City	State	ZIP Code
------	-------	----------

Name

Number Street

City	State	ZIP Code
------	-------	----------

Name

Number Street

City	State	ZIP Code
------	-------	----------

**On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.19 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 4.10 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 2.4 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**

Line 2.2 of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number****On which entry in Part 1 or Part 2 did you list the original creditor?**

Line \_\_\_\_\_ of (Check one):  Part 1: Creditors with Priority Unsecured Claims  
 Part 2: Creditors with Nonpriority Unsecured Claims

**Last 4 digits of account number**

## Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. § 159.  
Add the amounts for each type of unsecured claim.

		Total claim
Total claims from Part 1	6a. Domestic support obligations	6a. \$ 0.00
	6b. Taxes and certain other debts you owe the government	6b. \$ 591,918.00
	6c. Claims for death or personal injury while you were intoxicated	6c. \$ 0.00
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d. + \$ 5,057.38
	6e. Total. Add lines 6a through 6d.	6e. \$ 596,975.38

		Total claim
Total claims from Part 2	6f. Student loans	6f. \$ 0.00
	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g. \$ 0.00
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h. \$ 0.00
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i. + \$ 751,867.50
	6j. Total. Add lines 6f through 6i.	6j. \$ 751,867.50

**Fill in this information to identify your case:**

Debtor	Keith Andrew Wolff		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse If filing)	Wendy VonRecklinghausen Walker Wolff		
	First Name	Middle Name	Last Name

United States Bankruptcy Court for the District of South Carolina

Case number \_\_\_\_\_  
(If known)

Check if this is an amended filing

Official Form 106G

## **Schedule G: Executory Contracts and Unexpired Leases**

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?**  
 No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.  
 Yes. Fill in all of the information below even if the contracts or leases are listed on *Schedule A/B: Property* (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.**

Person or company with whom you have the contract or lease			State what the contract or lease is for
2.1	Tradd Management Company Name 1039 44th Avenue North, #203		Building Lease for Business Lessee
	Street Myrtle Beach	SC	29577
	City	State	ZIP Code
2.2	Auto Chlor Name 210 Cember Way, Suite B		Dishwasher Lease for Business Lessee
	Street Summerville	SC	29483
	City	State	ZIP Code
2.3	Kelly Tru Name 714 N. Myrtle Drive		Rental at 714 N. Myrtle Drive, Surfside Beach, SC Lessor
	Street Myrtle Beach	SC	29575
	City	State	ZIP Code
2.4	Ashlee Johnson Name 211 North Pinewood Drive		Rental of front of 211 North Pinewood Drive, Surfside Beach, SC - no utilities included Lessor
	Street Myrtle Beach	SC	29575
	City	State	ZIP Code
2.5	Allixandria Greenwell Name 212 Dogwood Drive North, Apt. A		Rental of 212 Dogwood Drive, Apt. A, Surfside Beach, SC - includes all utilities Lessor
	Street Myrtle Beach	SC	29575
	City	State	ZIP Code

**Additional Page if You Have More Contracts or Leases****Person or company with whom you have the contract or lease****What the contract or lease is for**

2.6

Mary Burns  
 Name  
 212 Dogwood Drive North, Apt. C  
 Street  
 Myrtle Beach SC 29575  
 City State ZIP Code

Rental of 212 Dogwood Drive, Apt. C, Surfside Beach, SC - includes all utilities  
 Lessor

2.7

Kesia Hamachek  
 Name  
 212 Dogwood Drive North, Apt B  
 Street  
 Myrtle Beach SC 29575  
 City State ZIP Code

Rental of 212 Dogwood Drive, Apt. B, Surfside Beach, SC - includes all utilities  
 Lessor

2.8

Name  
 Street  
 City State ZIP Code

2.9

Name  
 Street  
 City State ZIP Code

2.10

Name  
 Street  
 City State ZIP Code

2.11

Name  
 Street  
 City State ZIP Code

2.12

Name  
 Street  
 City State ZIP Code

2.13

Name  
 Street  
 City State ZIP Code

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Wendy VonRecklinghausen Walker Wolff		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (If known) _____			

Check if this is an amended filing

Official Form 106H

**Schedule H: Your Codebtors**

12/15

Codebtors are people or entities who are also liable for any debts you may have. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the Additional Page, fill it out, and number the entries in the boxes on the left. Attach the Additional Page to this page. On the top of any Additional Pages, write your name and case number (if known). Answer every question.

1. Do you have any codebtors? (If you are filing a joint case, do not list either spouse as a codebtor.)

No  
 Yes

2. Within the last 8 years, have you lived in a community property state or territory? (Community property states and territories include

Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No. Go to line 3.

Yes. Did your spouse, former spouse, or legal equivalent live with you at the time?

No

Yes. In which community state or territory did you live? \_\_\_\_\_ Fill in the name and current address of that person.

Name of your spouse, former spouse, or legal equivalent \_\_\_\_\_

Number \_\_\_\_\_ Street \_\_\_\_\_

City \_\_\_\_\_ State \_\_\_\_\_ ZIP Code \_\_\_\_\_

3. In Column 1, list all of your codebtors. Do not include your spouse as a codebtor if your spouse is filing with you. List the person shown in line 2 again as a codebtor only if that person is a guarantor or cosigner. Make sure you have listed the creditor on Schedule D (Official Form 106D), Schedule E/F (Official Form 106E/F), or Schedule G (Official Form 106G). Use Schedule D, Schedule E/F, or Schedule G to fill out Column 2.

**Column 1: Your codebtor**

**Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.1

Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line 2.2

3.2

Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line 2.1

3.3

Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.3  
 Schedule G, line \_\_\_\_\_

Debtor 1

Keith Andrew Wolff

First Name Middle Name

Last Name

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors****Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

Check all schedules that apply:

3.4 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.8  
 Schedule G, line \_\_\_\_\_

3.5 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.24  
 Schedule G, line \_\_\_\_\_

3.6 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.23  
 Schedule G, line \_\_\_\_\_

3.7 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.22  
 Schedule G, line \_\_\_\_\_

3.8 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.20  
 Schedule G, line \_\_\_\_\_

3.9 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.19  
 Schedule G, line \_\_\_\_\_

3.10 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.18  
 Schedule G, line \_\_\_\_\_

3.11 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 4.17  
 Schedule G, line \_\_\_\_\_



Debtor 1

Keith Andrew Wolff

First Name Middle Name

Last Name

Case number (if known) \_\_\_\_\_

**Additional Page to List More Codebtors****Column 1: Your codebtor****Column 2: The creditor to whom you owe the debt**

3.20 Salt Water Creek Cafe, LLC

Name  
4660 Highway 17 Bypass  
Street  
Murrells Inlet SC 29576

City State ZIP Code

Check all schedules that apply:

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line 2.2  
 Schedule G, line \_\_\_\_\_

3.\_\_\_\_\_

Name  
Street  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

3.\_\_\_\_\_

Name  
Street  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

3.\_\_\_\_\_

Name  
Street  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

3.\_\_\_\_\_

Name  
Street  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

3.\_\_\_\_\_

Name  
Street  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

3.\_\_\_\_\_

Name  
Street  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

3.\_\_\_\_\_

Name  
Street  
City State ZIP Code

Schedule D, line \_\_\_\_\_  
 Schedule E/F, line \_\_\_\_\_  
 Schedule G, line \_\_\_\_\_

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (if known) _____			

Check if this is:

An amended filing

A supplement showing postpetition chapter 13 income as of the following date:

MM / DD / YYYY

Official Form 106I

## Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

### Part 1: Describe Employment

1. Fill in your employment information.

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	Debtor 1	Debtor 2 or non-filing spouse
Employment status	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	Restaurant Manager	Server
Employer's name	CentraArchy	Surfside Seaside Restaurant, LLC
Employer's address	236 Albemarle Road Number Street	14 S. Ocean Blvd. Number Street
	Charleston, SC 29407 City State ZIP Code	Surfside Beach, SC 29575 City State ZIP Code

How long employed there? 2 months

### Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

- List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.
- Estimate and list monthly overtime pay.
- Calculate gross income. Add line 2 + line 3.

For Debtor 1	For Debtor 2 or non-filing spouse
2. \$ 2,307.71	\$ 3,647.17
3. + \$ 0.00	+ \$ 0.00
4. \$ 2,307.71	\$ 3,647.17

**Debtor 1**

---

First Name \_\_\_\_\_ Middle Name \_\_\_\_\_

First Name Middle Name

Last Name

Case number (if known)

	For Debtor 1	For Debtor 2 or non-filing spouse
Copy line 4 here.....	→ 4. \$ 2,307.71	\$ 3,647.17
5. List all payroll deductions:		
5a. Tax, Medicare, and Social Security deductions	5a. \$ 426.58	\$ 763.10
5b. Mandatory contributions for retirement plans	5b. \$ 0.00	\$ 0.00
5c. Voluntary contributions for retirement plans	5c. \$ 0.00	\$ 0.00
5d. Required repayments of retirement fund loans	5d. \$ 0.00	\$ 0.00
5e. Insurance	5e. \$ 168.55	\$ 0.00
5f. Domestic support obligations	5f. \$ 0.00	\$ 0.00
5g. Union dues	5g. \$ 0.00	\$ 0.00
5h. Other deductions. Specify: <u>Cash tips</u>	5h. + \$ _____	+ \$ 2,884.07
	\$ _____	\$ _____
	\$ _____	\$ _____
	\$ _____	\$ _____
6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6. \$ 595.13	\$ 3,647.17
7. Calculate total monthly take-home pay. Subtract line 6 from line 4.	7. \$ 1,712.58	\$ -0.00
8. List all other income regularly received:		
8a. Net income from rental property and from operating a business, profession, or farm	8a. \$ 0.00	\$ 0.00
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		
8b. Interest and dividends	8b. \$ 0.00	\$ 0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c. \$ 0.00	\$ 0.00
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		
8d. Unemployment compensation	8d. \$ 0.00	\$ 0.00
8e. Social Security	8e. \$ 0.00	\$ 0.00
8f. Other government assistance that you regularly receive		
Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		
Specify: _____	8f. \$ 0.00	\$ 0.00
8g. Pension or retirement income	8g. \$ 0.00	\$ 0.00
8h. Other monthly income. Specify: <u>E-Bay (est. average net)</u>	8h. + \$ 0.00	+ \$ 781.00
9. Add all other income. Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9. \$ 0.00	\$ 781.00
10. Calculate monthly income. Add line 7 + line 9.		
Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10. \$ 1,712.58	+ \$ 781.00 = \$ 2,493.58
11. State all other regular contributions to the expenses that you list in Schedule J.		
Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. + \$ 0.00	
12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income.		
Write that amount on the <i>Summary of Your Assets and Liabilities and Certain Statistical Information</i> , if it applies	12. \$ 2,493.58	
13. Do you expect an increase or decrease within the year after you file this form?		
<input checked="" type="checkbox"/> No.		
<input type="checkbox"/> Yes. Explain: _____		

MONTHLY RENTAL PROPERTIES INCOME STATEMENT

Address	714 N Myrtle Dr.	211 N Pinewood	1023 Plantation Ct
Rent	\$1,000.00	\$3,200.00	\$0
Repairs	\$100.00	\$150.00	\$100.00
Utilities	\$0	\$310	\$390
Insurance	\$467.00	\$654.00	\$125.00
Taxes	\$205.00	\$313.00	\$304.00
Mortgage	\$654.00	\$1,975.00	\$729.00
Income	(\$426.00)	(\$202.00)	(\$1,648.00)

\*Currently unoccupied

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff	
	First Name	Middle Name
	Wendy VonRecklinghausen Walker Wolff	
Debtor 2 (Spouse, if filing)	First Name	Middle Name
United States Bankruptcy Court for the:	District of South Carolina	
	(State)	
Case number (if known)		

Check if this is:

An amended filing  
 A supplement showing postpetition chapter 13 expenses as of the following date:

MM / DD / YYYY

Official Form 106J

## Schedule J: Your Expenses

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file Official Form 106J-2, *Expenses for Separate Household of Debtor 2*.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

Dependent's relationship to Debtor 1 or Debtor 2

Dependent's age

Does dependent live with you?

Spouse

\_\_\_\_\_

No  
 Yes

Son

22

No  
 Yes

Daughter

20

No  
 Yes

Daughter

14

No  
 Yes

Daughter

18

No  
 Yes

3. Do your expenses include expenses of people other than yourself and your dependents?

No

Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental *Schedule J*, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on *Schedule I: Your Income* (Official Form 106I.)

4. The rental or home ownership expenses for your residence. Include first mortgage payments and any rent for the ground or lot.

**Your expenses**

4. \$ 2,089.50

If not included in line 4:

4a. Real estate taxes  
 4b. Property, homeowner's, or renter's insurance  
 4c. Home maintenance, repair, and upkeep expenses  
 4d. Homeowner's association or condominium dues

4a. \$	0.00
4b. \$	0.00
4c. \$	200.00
4d. \$	0.00

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

<b>Your expenses</b>	
<b>5. Additional mortgage payments for your residence</b> , such as home equity loans	5. \$ <u>0.00</u>
<b>6. Utilities:</b>	
6a. Electricity, heat, natural gas	6a. \$ <u>380.00</u>
6b. Water, sewer, garbage collection	6b. \$ <u>110.00</u>
6c. Telephone, cell phone, Internet, satellite, and cable services	6c. \$ <u>570.00</u>
6d. Other. Specify: _____	6d. \$ <u>0.00</u>
<b>7. Food and housekeeping supplies</b>	
	7. \$ <u>1,200.00</u>
<b>8. Childcare and children's education costs</b>	
	8. \$ <u>800.00</u>
<b>9. Clothing, laundry, and dry cleaning</b>	
	9. \$ <u>250.00</u>
<b>10. Personal care products and services</b>	
	10. \$ <u>300.00</u>
<b>11. Medical and dental expenses</b>	
	11. \$ <u>150.00</u>
<b>12. Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	
	12. \$ <u>475.00</u>
<b>13. Entertainment, clubs, recreation, newspapers, magazines, and books</b>	
	13. \$ <u>0.00</u>
<b>14. Charitable contributions and religious donations</b>	
	14. \$ <u>0.00</u>
<b>15. Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a. Life insurance	15a. \$ <u>23.54</u>
15b. Health insurance	15b. \$ <u>0.00</u>
15c. Vehicle insurance	15c. \$ <u>517.00</u>
15d. Other insurance. Specify: <u>Keith - life insurance - monthly</u>	15d. \$ <u>311.00</u>
<b>16. Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	
	16. \$ <u>0.00</u>
<b>17. Installment or lease payments:</b>	
17a. Car payments for Vehicle 1	17a. \$ <u>0.00</u>
17b. Car payments for Vehicle 2	17b. \$ <u>0.00</u>
17c. Other. Specify: _____	17c. \$ <u>0.00</u>
17d. Other. Specify: _____	17d. \$ <u>0.00</u>
<b>18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).</b>	
	18. \$ <u>0.00</u>
<b>19. Other payments you make to support others who do not live with you.</b> Specify: _____	
	19. \$ <u>0.00</u>
<b>20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a. Mortgages on other property	20a. \$ <u>0.00</u>
20b. Real estate taxes	20b. \$ <u>0.00</u>
20c. Property, homeowner's, or renter's insurance	20c. \$ <u>0.00</u>
20d. Maintenance, repair, and upkeep expenses	20d. \$ <u>0.00</u>
20e. Homeowner's association or condominium dues	20e. \$ <u>0.00</u>

Debtor 1 **Keith Andrew Wolff**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

21. **Other.** Specify: Mortgages on other properties

31      **+\$**      0.00

+\$

+ \$

THE JOURNAL OF CLIMATE

## 22. Calculate your monthly expenses.

22a.      \$      7,376.04

\$ 7,376.04

22b. *a*

---

7 376 04

### 23. Calculate your monthly net income.

22- \$ 2,493.58

€

7.678.34

23b. - \$ 7,378.04

\$ -4,882.46

23c. \$ \_\_\_\_\_ 1,000.00

24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes.

Explain here:

Fill in this information to identify your case:

Debtor 1 Keith Andrew Wolff  
First Name Middle Name Last Name

Debtor 2 Wendy VonRecklinghausen Walker Wolff  
(Spouse, if filing) First Name Middle Name Last Name

United States Bankruptcy Court for the District of South Carolina

Case number \_\_\_\_\_

Check if this is an amended filing

Official Form 106Dec

## Declaration About an Individual Debtor's Schedules

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Sign Below

Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_ . Attach *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.

**X** /s/ Keith Andrew Wolff

Signature of Debtor 1

Date 07/08/2019  
MM / DD / YYYY

**X** /s/ Wendy VonRecklinghausen Walke

Signature of Debtor 2

Date 07/08/2019  
MM / DD / YYYY

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff		
	First Name	Middle Name	Last Name
Debtor 2 (Spouse, if filing)	Wendy VonRecklinghausen Walker Wolff		
	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: District of South Carolina			
Case number (if known) _____			

Check if this is an amended filing

## Official Form 107

### Statement of Financial Affairs for Individuals Filing for Bankruptcy

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### Part 1: Give Details About Your Marital Status and Where You Lived Before

1. What is your current marital status?

Married  
 Not married

2. During the last 3 years, have you lived anywhere other than where you live now?

No  
 Yes. List all of the places you lived in the last 3 years. Do not include where you live now.

Debtor 1:	Dates Debtor 1 lived there	Debtor 2:	Dates Debtor 2 lived there
Number Street	From _____ To _____	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
City State ZIP Code	City State ZIP Code		
Number Street	From _____ To _____	<input type="checkbox"/> Same as Debtor 1	<input type="checkbox"/> Same as Debtor 1 From _____ To _____
City State ZIP Code	City State ZIP Code		

3. Within the last 8 years, did you ever live with a spouse or legal equivalent in a community property state or territory? (Community property states and territories include Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, and Wisconsin.)

No  
 Yes. Make sure you fill out Schedule H: Your Codebtors (Official Form 106H).

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 2: Explain the Sources of Your Income**

**4. Did you have any income from employment or from operating a business during this year or the two previous calendar years?**

Fill in the total amount of income you received from all jobs and all businesses, including part-time activities.

If you are filing a joint case and you have income that you receive together, list it only once under Debtor 1.

No

Yes. Fill in the details.

	<b>Debtor 1</b>		<b>Debtor 2</b>
	<b>Sources of income</b> Check all that apply.	<b>Gross income</b> (before deductions and exclusions)	<b>Sources of income</b> Check all that apply.
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ 22,386.70	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business
<b>For last calendar year:</b> (January 1 to December 31, <u>2018</u> <u>YYYY</u> )	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ 99,999.90	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2017</u> <u>YYYY</u> )	<input checked="" type="checkbox"/> Wages, commissions, bonuses, tips <input type="checkbox"/> Operating a business	\$ 103,846.00	<input type="checkbox"/> Wages, commissions, bonuses, tips <input checked="" type="checkbox"/> Operating a business

**5. Did you receive any other income during this year or the two previous calendar years?**

Include income regardless of whether that income is taxable. Examples of *other income* are alimony; child support; Social Security, unemployment, and other public benefit payments; pensions; rental income; interest; dividends; money collected from lawsuits; royalties; and gambling and lottery winnings. If you are filing a joint case and you have income that you received together, list it only once under Debtor 1.

List each source and the gross income from each source separately. Do not include income that you listed in line 4.

No

Yes. Fill in the details.

	<b>Debtor 1</b>		<b>Debtor 2</b>
	<b>Sources of income</b> Describe below.	<b>Gross income from each source</b> (before deductions and exclusions)	<b>Sources of income</b> Describe below.
<b>From January 1 of current year until the date you filed for bankruptcy:</b>	Rent _____ _____ _____	\$ 24,750.00 \$ _____ \$ _____	E-Bay (gross) \$ 13,590.00 \$ _____ \$ _____
<b>For last calendar year:</b> (January 1 to December 31, <u>2018</u> )	Rent _____ \$ _____ \$ _____	\$ 59,400.00 \$ _____ \$ _____	E-Bay (gross) \$ 46,662.00 \$ _____ \$ _____
<b>For the calendar year before that:</b> (January 1 to December 31, <u>2017</u> )	Rent _____ \$ _____ \$ _____	\$ 63,000.00 \$ _____ \$ _____	E-Bay (gross) \$ 37,600.00 \$ _____ \$ _____

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Part 3: List Certain Payments You Made Before You Filed for Bankruptcy**

**6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts?**

No. **Neither Debtor 1 nor Debtor 2 has primarily consumer debts.** Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,825\* or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$6,825\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

\* Subject to adjustment on 4/01/22 and every 3 years after that for cases filed on or after the date of adjustment.

Yes. **Debtor 1 or Debtor 2 or both have primarily consumer debts.**

During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more?

No. Go to line 7.

Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case.

	Dates of payment	Total amount paid	Amount you still owe	Was this payment for...
Internal Revenue Service Creditor's Name	6/12/2019	\$ 55,354.29	\$ 589,213.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other _____
Centralized Insolvency Operation Number Street				
P.O. Box 7346				
Philadelphia PA 19101-73 City State ZIP Code				
South Carolina Dept. of Revenue and T Creditor's Name	05/2019	\$ 102,468.33	\$ 0.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other _____
P.O. Box 12265 Number Street	05/2019			
Columbia SC 29211-99 City State ZIP Code				
AGL Services LLC Creditor's Name	06/2019	\$ 12,105.86	\$ 0.00	<input type="checkbox"/> Mortgage <input type="checkbox"/> Car <input type="checkbox"/> Credit card <input type="checkbox"/> Loan repayment <input type="checkbox"/> Suppliers or vendors <input checked="" type="checkbox"/> Other air conditioner _____
PO Box 912 Number Street	06/2019			
Johns Island SC 29457 City State ZIP Code				

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**7. Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider?**

*Insiders* include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.

No

Yes. List all payments to an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		

**8. Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider?**

Include payments on debts guaranteed or cosigned by an insider.

No

Yes. List all payments that benefited an insider.

	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment Include creditor's name
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		
Insider's Name		\$ _____	\$ _____	
Number Street				
City	State	ZIP Code		

**Debtor 1**

Keith Andrew Wolff

Last Name

Case number (*if known*)

#### Part 4: Identify Legal Actions, Repossessions, and Foreclosures

9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding?

List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes.

No

Yes. Fill in the details.

10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied?

Check all that apply and fill in the details below.

No. Go to line 11.

❑ Yes. Fill in the information below.

Describe the property		Date	Value of the property
<input type="text" value="Creditor's Name"/>		<input type="text"/>	\$ <input type="text"/>
<input type="text"/> Number <input type="text"/> Street <input type="text"/>		<b>Explain what happened</b>	
		<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	
<input type="text"/> City <input type="text"/> State <input type="text"/> ZIP Code		<b>Describe the property</b>	
<input type="text" value="Creditor's Name"/>		<input type="text"/>	\$ <input type="text"/>
<input type="text"/> Number <input type="text"/> Street <input type="text"/>		<b>Explain what happened</b>	
		<input type="checkbox"/> Property was repossessed. <input type="checkbox"/> Property was foreclosed. <input type="checkbox"/> Property was garnished. <input type="checkbox"/> Property was attached, seized, or levied.	
<input type="text"/> City <input type="text"/> State <input type="text"/> ZIP Code			

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt?**

No

Yes. Fill in the details.

Describe the action the creditor took		Date action was taken	Amount
Creditor's Name			
Number Street		\$ _____	
City	State	ZIP Code	Last 4 digits of account number: XXXX-

**12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official?**

No

Yes

#### Part 5: List Certain Gifts and Contributions

**13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person?**

No

Yes. Fill in the details for each gift.

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift		_____	\$ _____
Number Street		_____	\$ _____
City State ZIP Code			
Person's relationship to you			

Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
Person to Whom You Gave the Gift		_____	\$ _____
Number Street		_____	\$ _____
City State ZIP Code			
Person's relationship to you			

Debtor 1 **Keith Andrew Wolff**  
First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity?

No

Yes. Fill in the details for each gift or contribution.

## Part 6: List Certain Losses

15. Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling?

No  
 Yes. Fill in the details.

Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss	Date of your loss	Value of property lost
	Include the amount that insurance has paid. List pending insurance claims on line 33 of <i>Schedule A/B: Property</i> .		\$ _____

**Part 7: List Certain Payments or Transfers**

16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition?

Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy.

No  
 Yes. Fill in the details.

Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Payment of \$7,470.00 included \$4,500.00 for individual Chapter 7, \$335.00 filing fee, and \$2,635.00 toward business Chapter 7.	<u>5/8/2019</u>	\$ <u>7,470.00</u>
		\$ <u>                  </u>

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			\$ _____
Number Street			\$ _____
City State ZIP Code			
Email or website address			
Person Who Made the Payment, if Not You			

**17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors?**

Do not include any payment or transfer that you listed on line 16.

No

Yes. Fill in the details.

	Description and value of any property transferred	Date payment or transfer was made	Amount of payment
Person Who Was Paid			\$ _____
Number Street			\$ _____
City State ZIP Code			

**18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs?**

Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement.

No

Yes. Fill in the details.

	Description and value of property transferred	Describe any property or payments received or debts paid in exchange	Date transfer was made
Liquidated Fidelity Account Person Who Received Transfer	account liquidated, \$5,762.28	Account liquidated to pay for air conditioner unit for rental property, to replace old broken unit	<u>06/17/2019</u>
Number Street			
City State ZIP Code			
Person's relationship to you			
Kater Wolff Person Who Received Transfer	2004 Toyota Highlander, \$2,900.00	18 YO daughter, title transferred for daughter to assume maintenance, insurance, taxes going forward	<u>04/30/2019</u>
652 4th Avenue North Number Street			
Myrtle Beach SC 29575 City State ZIP Code			
Person's relationship to you	Daughter		

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.)**

No  
 Yes. Fill in the details.

Description and value of the property transferred	Date transfer was made
Name of trust _____	_____

**Part 8: List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units**

**20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred?**

Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions.

No  
 Yes. Fill in the details.

Last 4 digits of account number	Type of account or instrument	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
Wells Fargo #3322 Name of Financial Institution _____ Number Street _____ City _____ State _____ ZIP Code _____	XXXX- <u>3</u> <u>3</u> <u>2</u> <u>2</u> <input checked="" type="checkbox"/> Checking <input type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	4/15/19	\$ <u>1,883.09</u>
Wells Fargo #9232 Name of Financial Institution _____ Number Street _____ City _____ State _____ ZIP Code _____	XXXX- <u>9</u> <u>2</u> <u>3</u> <u>2</u> <input type="checkbox"/> Checking <input checked="" type="checkbox"/> Savings <input type="checkbox"/> Money market <input type="checkbox"/> Brokerage <input type="checkbox"/> Other _____	4/17/19	\$ <u>669.96</u>

**21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables?**

No  
 Yes. Fill in the details.

Who else had access to it?	Describe the contents	Do you still have it?
Name of Financial Institution _____ Number Street _____ City _____ State _____ ZIP Code _____	Name _____ Number Street _____ City _____ State _____ ZIP Code _____	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy?**

No

Yes. Fill in the details.

Who else has or had access to it?	Describe the contents	Do you still have it?
<u>Outbox Self Storage</u> Name of Storage Facility	<u>Name</u>  <u>2283 Glens Bay Road</u> Number Street	glassware; plates; tins; household kitchen items; clothes; frames, bench; garage sale and auction purchases. This is E-Bay inventory. Over 50% of items are jointly owned with 2 friends in joint venture.
<u>Myrtle Beach</u> SC 29575 City State ZIP Code	<u>City State ZIP Code</u>	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes

**Part 9: Identify Property You Hold or Control for Someone Else**

**23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.**

No

Yes. Fill in the details.

A. Wolff  
Owner's Name  
  
Number Street  
  
City State ZIP Code

Where is the property?	Describe the property	Value
<u>Number Street</u>  <u>SC</u> City State ZIP Code	Items in storage unit are jointly owned. See #22. Children in household have clothes, furniture, bikes that they purchased themselves or were gifts from grandparents.	\$ <u>0.00</u>

**Part 10: Give Details About Environmental Information**

For the purpose of Part 10, the following definitions apply:

- **Environmental law** means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material.
- **Site** means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites.
- **Hazardous material** means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term.

Report all notices, releases, and proceedings that you know about, regardless of when they occurred.

**24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law?**

No

Yes. Fill in the details.

Governmental unit	Environmental law, if you know it	Date of notice
<u>Name of site</u>  <u>Number Street</u>  <u>City State ZIP Code</u>	<u>Governmental unit</u>  <u>Number Street</u>  <u>City State ZIP Code</u>	_____

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**25. Have you notified any governmental unit of any release of hazardous material?**

**No**

**Yes. Fill in the details.**

Governmental unit		Environmental law, if you know it	Date of notice
Name of site	Governmental unit		
Number Street	Number Street		
		City	State ZIP Code
City	State	ZIP Code	

**26. Have you been a party in any judicial or administrative proceeding under any environmental law? Include settlements and orders.**

**No**

**Yes. Fill in the details.**

Case title	Court or agency	Nature of the case	Status of the case
	Court Name		<input type="checkbox"/> Pending
	Number Street		<input type="checkbox"/> On appeal
Case number	City State ZIP Code		<input type="checkbox"/> Concluded

**Part 11: Give Details About Your Business or Connections to Any Business**

**27. Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business?**

- A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time
- A member of a limited liability company (LLC) or limited liability partnership (LLP)
- A partner in a partnership
- An officer, director, or managing executive of a corporation
- An owner of at least 5% of the voting or equity securities of a corporation

**No. None of the above applies. Go to Part 12.**

**Yes. Check all that apply above and fill in the details below for each business.**

Salt Water Creek Cafe, LLC Business Name 4660 Highway 17 Bypass Number Street	Describe the nature of the business Restaurant	Employer Identification number Do not include Social Security number or ITIN.  EIN: <u>2</u> <u>6</u> - <u>1</u> <u>7</u> <u>7</u> <u>1</u> <u>9</u> <u>9</u> <u>1</u>
Murrells Inlet SC 29576 City State ZIP Code	Name of accountant or bookkeeper Keith Wolff; Smith Sapp, CPA	Dates business existed  From <u>01/10/2008</u> To <u>06/10/2019</u>
E-Bay/JUSTWHATURLOOKING4 Business Name 652 4th Avenue North Number Street	Describe the nature of the business	Employer Identification number Do not include Social Security number or ITIN.  EIN: _____
Myrtle Beach SC 29575 City State ZIP Code	Name of accountant or bookkeeper	Dates business existed  From _____ To _____

Debtor 1 Keith Andrew Wolff

First Name Middle Name

Last Name

Case number (if known)

Business Name

Number Street

City State ZIP Code

Describe the nature of the business

Employer Identification number

Do not include Social Security number or ITIN.

EIN: \_\_\_\_\_

Dates business existed

Name of accountant or bookkeeper

From \_\_\_\_\_ To \_\_\_\_\_

28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.

No

Yes. Fill in the details below.

Date issued

Name

MM / DD / YYYY

Number Street

City State ZIP Code

#### Part 12: Sign Below

I have read the answers on this *Statement of Financial Affairs* and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both.  
18 U.S.C. §§ 152, 1341, 1519, and 3571.

 /s/ Keith Andrew Wolff

Signature of Debtor 1

 /s/ Wendy VonRecklinghausen Walker Wolff

Signature of Debtor 2

Date 07/08/2019

Date 07/08/2019

Did you attach additional pages to *Your Statement of Financial Affairs for Individuals Filing for Bankruptcy* (Official Form 107)?

No

Yes

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

No

Yes. Name of person \_\_\_\_\_

Attach the *Bankruptcy Petition Preparer's Notice, Declaration, and Signature* (Official Form 119).

Debtor 1

First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Continuation Sheet for Official Form 107**

**18) Transfers within 2 years**

**Person Who Received Transfer:**

David Hoke Petree, Jr.

410 North Myrtle Drive

Myrtle Beach, SC 29575

**Person's relationship to you:**

Description and value of property transferred: Unimproved Lots in Surfside Beach, SC, \$160,000.00

Describe any property or payments received or debts paid in exchange: 100% of proceeds were paid to SCDOR and IRS for priority tax debt.

Date transfer was made: 05/28/2019

---

**20) Bank accounts**

Wells Fargo	Checking	5/31/19	\$0.00
#1444 (with daughter "K") (balance 0), , ,			
Wells Fargo	Savings	4/15/19	\$2,996.00
#8267, , ,			

**23) Property holding for another**

Salt Water Creek Cafe LLC, , ,	Location: debtor's home, ,	alcohol inventory, \$2, 000.00
Kathy Cacicedo, , ,	Location: 652 4th Avenue North, Myrtle Beach, SC 29575	Gold jewelry for sale on e-bay; Action purchase for sale with 2 partners, \$0.00

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff	
	First Name	Middle Name
	Last Name	
Debtor 2 (Spouse, if filing)	Wendy VonRecklinghausen Walker Wolff	
	First Name	Middle Name
	Last Name	
United States Bankruptcy Court for the District of South Carolina		
Case number (if known)		-----

Check if this is an amended filing

Official Form 108

**Statement of Intention for Individuals Filing Under Chapter 7**

12/15

If you are an individual filing under chapter 7, you must fill out this form if:

- creditors have claims secured by your property, or
- you have leased personal property and the lease has not expired.

You must file this form with the court within 30 days after you file your bankruptcy petition or by the date set for the meeting of creditors, whichever is earlier, unless the court extends the time for cause. You must also send copies to the creditors and lessors you list on the form.

If two married people are filing together in a joint case, both are equally responsible for supplying correct information.

Both debtors must sign and date the form.

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

**Part 1: List Your Creditors Who Have Secured Claims**

- For any creditors that you listed in Part 1 of *Schedule D: Creditors Who Have Claims Secured by Property* (Official Form 106D), fill in the information below.

Identify the creditor and the property that is collateral	What do you intend to do with the property that secures a debt?	Did you claim the property as exempt on Schedule C?
Creditor's name: Select Portfolio Services	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]: _____	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: 1023 Plantation Court		
Creditor's name: Bank of America	<input type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input checked="" type="checkbox"/> Retain the property and [explain]: Retain - stay current	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of property securing debt: 652 4th Avenue North		
Creditor's name: USAA	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: 212 N. Dogwood Drive		
Creditor's name: Bank of America	<input checked="" type="checkbox"/> Surrender the property. <input type="checkbox"/> Retain the property and redeem it. <input type="checkbox"/> Retain the property and enter into a <i>Reaffirmation Agreement</i> . <input type="checkbox"/> Retain the property and [explain]:	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of property securing debt: 212 N. Dogwood Drive		

**Part 2: List Your Unexpired Personal Property Leases**

For any unexpired personal property lease that you listed in *Schedule G: Executory Contracts and Unexpired Leases* (Official Form 106G), fill in the information below. Do not list real estate leases. *Unexpired leases* are leases that are still in effect; the lease period has not yet ended. You may assume an unexpired personal property lease if the trustee does not assume it. 11 U.S.C. § 365(p)(2).

Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Auto Chlor	<input checked="" type="checkbox"/> No <input type="checkbox"/> Yes
Description of leased property: Dishwasher Lease for Business	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	
Lessor's name:	<input type="checkbox"/> No <input checked="" type="checkbox"/> Yes
Description of leased property:	

**Part 3: Sign Below**

Under penalty of perjury, I declare that I have indicated my intention about any property of my estate that secures a debt and any personal property that is subject to an unexpired lease.

 /s/ Keith Andrew Wolff

Signature of Debtor 1

Date 07/08/2019

MM / DD / YYYY

 /s/ Wendy VonRecklinghausen Walker W

Signature of Debtor 2

Date 07/08/2019

MM / DD / YYYY

Debtor 1

First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Continuation Sheet for Official Form 108**

**1) Creditors who have secured claims**

SPS	714 Myrtle Drive North	No exemptions	surrender
Northwest Mutual Whole Life	Northwest Mutual Whole Life (loan against, see Sch D)	Has exemptions	

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Wendy VonRecklinghausen Walker Wolff	
	First Name	Middle Name
United States Bankruptcy Court for the District of South Carolina		
Case number (if known)		

Check one box only as directed in this form and in  
Form 122A-1Supp:

1. There is no presumption of abuse.

2. The calculation to determine if a presumption of abuse applies will be made under *Chapter 7 Means Test Calculation* (Official Form 122A-2).

3. The Means Test does not apply now because of qualified military service but it could apply later.

 Check if this is an amended filing

## Official Form 122A-1

## Chapter 7 Statement of Your Current Monthly Income

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On the top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file *Statement of Exemption from Presumption of Abuse Under § 707(b)(2)* (Official Form 122A-1Supp) with this form.

## Part 1: Calculate Your Current Monthly Income

## 1. What is your marital and filing status? Check one only.

Not married. Fill out Column A, lines 2-11.

Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.

Married and your spouse is NOT filing with you. You and your spouse are:

- Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
- Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case. 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	Column A Debtor 1	Column B Debtor 2 or non-filing spouse
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$ _____	\$ _____
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$ _____	\$ _____
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$ _____	\$ _____
5. Net income from operating a business, profession, or farm	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ _____	\$ _____
Ordinary and necessary operating expenses	- \$ _____	- \$ _____
Net monthly income from a business, profession, or farm	\$ _____	\$ _____
	Copy here ➔	\$ _____
6. Net income from rental and other real property	Debtor 1	Debtor 2
Gross receipts (before all deductions)	\$ _____	\$ _____
Ordinary and necessary operating expenses	- \$ _____	- \$ _____
Net monthly income from rental or other real property	\$ _____	\$ _____
	Copy here ➔	\$ _____
7. Interest, dividends, and royalties		\$ _____

Debtor 1 **Keith Andrew Wolff**  
 First Name Middle Name Last Name

Case number (if known) \_\_\_\_\_

**Column A**  
**Debtor 1**

**Column B**  
**Debtor 2 or**  
**non-filing spouse**

\$ \_\_\_\_\_ \$ \_\_\_\_\_

**8. Unemployment compensation**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 

For you ..... \$ \_\_\_\_\_

For your spouse ..... \$ \_\_\_\_\_

**9. Pension or retirement income.** Do not include any amount received that was a benefit under the Social Security Act. \$ \_\_\_\_\_ \$ \_\_\_\_\_

**10. Income from all other sources not listed above.** Specify the source and amount.

Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below.

\_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

\$ \_\_\_\_\_ \$ \_\_\_\_\_

+ \$ \_\_\_\_\_ + \$ \_\_\_\_\_

\$ \_\_\_\_\_ + \$ \_\_\_\_\_ = \$ \_\_\_\_\_

Total current monthly income

**11. Calculate your total current monthly income.** Add lines 2 through 10 for each column. Then add the total for Column A to the total for Column B.

**Part 2: Determine Whether the Means Test Applies to You**

**12. Calculate your current monthly income for the year.** Follow these steps:

12a. Copy your total current monthly income from line 11.  Copy line 11 here → \$ \_\_\_\_\_

Multiply by 12 (the number of months in a year).  x 12

12b. The result is your annual income for this part of the form.

12b. \$ \_\_\_\_\_

**13. Calculate the median family income that applies to you.** Follow these steps:

Fill in the state in which you live.

\_\_\_\_\_

Fill in the number of people in your household.

\_\_\_\_\_

Fill in the median family income for your state and size of household. 13. \$ \_\_\_\_\_

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse.*  
 Go to Part 3.

14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 122A-2.*  
 Go to Part 3 and fill out Form 122A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

 /s/ Keith Andrew Wolff

Signature of Debtor 1

Date 07/08/2019  
 MM / DD / YYYY

 /s/ Wendy VonRecklinghausen Walker Wolff

Signature of Debtor 2

Date 07/08/2019  
 MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Fill in this information to identify your case:

Debtor 1	Keith Andrew Wolff	
	First Name	Middle Name
Debtor 2 (Spouse, if filing)	Wendy VonRecklinghausen Walker Wolff	
	First Name	Middle Name
United States Bankruptcy Court for the: District of South Carolina		
Case number (If known)		

 Check if this is an amended filing**Official Form 122A-1Supp****Statement of Exemption from Presumption of Abuse Under § 707(b)(2) 12/15**

File this supplement together with *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1), if you believe that you are exempted from a presumption of abuse. Be as complete and accurate as possible. If two married people are filing together, and any of the exclusions in this statement applies to only one of you, the other person should complete a separate Form 122A-1 if you believe that this is required by 11 U.S.C. § 707(b)(2)(C).

**Part 1: Identify the Kind of Debts You Have**

1. **Are your debts primarily consumer debts?** *Consumer debts* are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." Make sure that your answer is consistent with the answer you gave on line 16 of the *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101).

No. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

Yes. Go to Part 2.

**Part 2: Determine Whether Military Service Provisions Apply to You**

2. **Are you a disabled veteran** (as defined in 38 U.S.C. § 3741(1))?

No. Go to line 3.

Yes. Did you incur debts mostly while you were on active duty or while you were performing a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1).

No. Go to line 3.

Yes. Go to Form 122A-1; on the top of page 1 of that form, check box 1, *There is no presumption of abuse*, and sign Part 3. Then submit this supplement with the signed Form 122A-1.

3. **Are you or have you been a Reservist or member of the National Guard?**

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Were you called to active duty or did you perform a homeland defense activity? 10 U.S.C. § 101(d)(1); 32 U.S.C. § 901(1)

No. Complete Form 122A-1. Do not submit this supplement.

Yes. Check any one of the following categories that applies:

I was called to active duty after September 11, 2001, for at least 90 days and remain on active duty.

I was called to active duty after September 11, 2001, for at least 90 days and was released from active duty on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

I am performing a homeland defense activity for at least 90 days.

I performed a homeland defense activity for at least 90 days, ending on \_\_\_\_\_, which is fewer than 540 days before I file this bankruptcy case.

If you checked one of the categories to the left, go to Form 22A-1. On the top of page 1 of Form 22A-1, check box 3, *The Means Test does not apply now*, and sign Part 3. Then submit this supplement with the signed Form 22A-1. You are not required to fill out the rest of Official Form 22A-1 during the exclusion period. The *exclusion period* means the time you are on active duty or are performing a homeland defense activity, and for 540 days afterward. 11 U.S.C. § 707(b)(2)(D)(ii).

If your exclusion period ends before your case is closed, you may have to file an amended form later.

Allixandria Greenwell  
212 Dogwood Drive North, Apt. A  
Myrtle Beach, SC 29575

Alesco Linen  
4921 Chateau Avenue  
North Charleston, SC 29405

AmeriGas  
3951 Dick Pond Road  
Myrtle Beach, SC 29588

American Express  
P.O. Box 650448  
Dallas, TX 75265-0448

Ashlee Johnson  
211 North Pinewood Drive  
Myrtle Beach, SC 29575

Auto Chlor  
210 Cember Way, Suite B  
Summerville, SC 29483

Bank of America  
1207 Highway 17 North  
Myrtle Beach, SC 29575

Bank of America  
P.O. Box 15019  
Wilmington, DE 19886-5019

Barclay Card Services  
P.O. Box 8801  
Wilmington, DE 19899

Cozzini Brothers, Inc.  
350 Howard Avenue  
Des Plaines, IL 60018

George and Ann Walker  
18 Breton Harbors Drive  
Toms River, NJ 08753

Georgetown County  
P.O. Box 421270  
Georgetown, SC 29442

Grand Strand Hospital  
P.O. Box 740771  
Cincinnati, OH 45274-0771

Home Depot  
P.O. Box 9001010  
Louisville, KY 40290

Imagination Athletics  
P.O. Box 2868  
Myrtle Beach, SC 29578

Inland Seafood  
3725 N. Davidson Street  
Charlotte, NC 28205

Internal Revenue Service  
Centralized Insolvency Operation  
P.O. Box 7346  
Philadelphia, PA 19101-7346

Kelly Tru  
714 N. Myrtle Drive  
Myrtle Beach, SC 29575

Kesia Hamachek  
212 Dogwood Drive North, Apt B  
Myrtle Beach, SC 29575

Lee's Farm  
4883 North Highway 17  
Murrells Inlet, SC 29576

MUSC Health  
P.O. Box 931736  
Atlanta, GA 31193

Mary Burns  
212 Dogwood Drive North, Apt. C  
Myrtle Beach, SC 29575

McClatchy  
2100 Q Street  
Sacramento, CA 95816

NPAS, Inc.  
P.O. Box 99400  
Louisville, KY 40269

Northwest Mutual Whole Life

Northwestern Mutual  
720 East Wisconsin Avenue  
Milwaukee, WI 53202-4797

Performance Food Group  
2801 Alex Lee Blvd.  
Florence, SC 29506

SESAC  
P.O. Box 5246  
New York, NY 10008

SPS  
P.O. Box 65250  
Salt Lake City, UT 84165

Salt Water Creek Cafe, LLC  
4660 Highway 17 Bypass  
Murrells Inlet, SC 29576

Santee Cooper  
P.O. Box 188  
Moncks Corner, SC 29461

Select Portfolio Services  
P.O. Box 65250  
Salt Lake City, UT 84165

South Carolina Dept of Employment and Workforce  
1550 Gadsden Street  
Columbia, SC 29202

South Carolina Dept. of Revenue and Taxation  
P.O. Box 12265  
Columbia, SC 29211-9979

The Sun News  
914 Frontage Road East  
Myrtle Beach, SC 29577

Tradd Management Company  
1039 44th Avenue North, #203  
Myrtle Beach, SC 29577

US Foods  
P.O. Box 60220  
Charlotte, NC 28260

USAA  
9800 Frederickburg Road  
San Antonio, TX 78288

USAA  
9800 Fredericksburg Road  
San Antonio, TX 78288

United States Dept. of Justice  
Civil Trial Section Western Region  
Box 683 Ben Franklin Station  
Washington, DC 20044

Wachesaw, LLC  
1039 44th Avenue North, Suite 203  
Myrtle Beach, SC 29577

Waste Management Co.  
1001 Fannin Street  
Houston, TX 77002

Yesco Myrtle Beach  
6511A Dick Pond Road  
Myrtle Beach, SC 29588

United States Bankruptcy Court  
District of South Carolina

In re: Keith Andrew Wolff & Wendy  
VonRecklinghausen Walker Wolff  
Debtor(s)

Case No.  
Chapter 7

**Verification of Creditor Matrix**

The above-named Debtor(s) hereby verify that the attached list of creditors is true and correct to the best of their knowledge.

Date: 07/08/2019

/s/ Keith Andrew Wolff  
Signature of Debtor

/s/ Wendy VonRecklinghausen Walker W  
Signature of Joint Debtor

## Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

### This notice is for you if:

- You are an individual filing for bankruptcy, and
- Your debts are primarily consumer debts. *Consumer debts* are defined in 11 U.S.C. § 101(8) as “incurred by an individual primarily for a personal, family, or household purpose.”

### Chapter 7: Liquidation

\$245	filing fee
\$75	administrative fee
+	
\$15	trustee surcharge
\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their non-exempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

**You should have an attorney review your decision to file for bankruptcy and the choice of chapter.**

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form—the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form—sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

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## Chapter 11: Reorganization

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\$1,167	filin	g fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

## Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

\$200	filing fee
+	\$75 administrative fee
	\$275 total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

### Chapter 13: Repayment plan for individuals with regular income

\$235	filing fee
+	\$75 administrative fee
	\$310 total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

### **Warning: File Your Forms on Time**

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to:

[http://www.uscourts.gov/bkforms/bankruptcy\\_forms.html#procedure](http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure).

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

### **Understand which services you could receive from credit counseling agencies**

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

[http://justice.gov/ust/eo/hapcpa/ccde/cc\\_approved.html](http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html).

In Alabama and North Carolina, go to:

<http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCreditAndDebtCounselors.aspx>.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

### **Bankruptcy crimes have serious consequences**

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### **Make sure the court has your mailing address**

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

# United States Bankruptcy Court

District of South Carolina

**In re** Keith Andrew Wolff & Wendy VonRecklinghausen Walker Wolff

Case No. \_\_\_\_\_

**Debtor**

Chapter <sup>7</sup> \_\_\_\_\_

## DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR

1. Pursuant to 11 U.S.C. § 329(a) and Fed. Bankr. P. 2016(b), I certify that I am the attorney for the above named debtor(s) and that compensation paid to me within one year before the filing of the petition in bankruptcy, or agreed to be paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:

FLAT FEE

For legal services, I have agreed to accept ..... \$ 4,500.00  
Prior to the filing of this statement I have received ..... \$ 4,500.00  
Balance Due. .... \$ 0.00

RETAINER

For legal services, I have agreed to accept a retainer of ..... \$ .....  
The undersigned shall bill against the retainer at an hourly rate of ..... \$ .....  
[Or attach firm hourly rate schedule.] Debtor(s) have agreed to pay all Court approved fees and expenses exceeding the amount of the retainer.

2. The source of the compensation paid to me was:

Debtor  Other (specify)

3. The source of compensation to be paid to me is:

Debtor  Other (specify)

4.  I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.

I have agreed to share the above-disclosed compensation with a other person or persons who are not members or associates of my law firm. A copy of the Agreement, together with a list of the names of the people sharing the compensation is attached.

5. In return of the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including:

- a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

d. [Other provisions as needed]  
See Retainer Agreement

6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:  
See Retainer Agreement

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

07/08/2019

/s/ Christine E. Brimm, SC 6569 / FED 6313

*Date*

*Signature of Attorney*

Barton Brimm, PA

*Name of law firm*  
3955 Highway 17 Bypass, Suite D  
Murrells Inlet, SC 29576  
cbrimm@bartonbrimm.com

CHRISTINE E. BRIMM  
*Certified Specialist in Bankruptcy  
and Debtor-Creditor Law*

BARBARA GEORGE BARTON  
*Retired*



Mailing Address  
P.O. Box 2746  
Murrells Inlet, SC 29576

cbrimm@bartonbrimm.com

3955 Highway 17 Bypass  
Suite D  
Murrells Inlet, SC 29576  
(803) 256-6582  
www.bartonbrimm.com

May 8, 2019

**VIA E-MAIL** [wwolff@sc.rr.com](mailto:wwolff@sc.rr.com) and  
[wolff682@gmail.com](mailto:wolff682@gmail.com)

Keith and Wendy Wolff  
652 4<sup>th</sup> Avenue North  
Surfside Beach, SC 29575

Re: Retainer Agreement

Dear Mr. and Mrs. Wolff:

This confirms the agreement between you (“You”) and Barton Brimm, PA (the “Firm”) pursuant to which the Firm has agreed to represent You. The representation pursuant to this agreement is limited to the filing of a Chapter 7 bankruptcy for You. Representation pursuant to this Retainer Agreement expressly excludes the representation of any entity, but only the individuals signing this Retainer Agreement and only in their capacity as individuals.

Representation pursuant to this agreement will commence upon the Firm’s receipt of a flat fee Retainer in the amount of \$4,500.00. This does not include the Chapter 7 filing fee, which must be paid in addition to the Retainer amount, and does not include any additional filing fees which may arise during the course of the bankruptcy. The filing fee for a Chapter 7 is \$335.00 and must be paid before the bankruptcy is filed. The Retainer will be deposited directly into the Firm’s operating bank account and will not be held in the Firm’s trust account until earned. The Firm shall send an informational invoice to You including a detailed daily description of its time, charges and reimbursable expenses by the fifteenth (15th) day of each month for services performed and expenses incurred during the preceding calendar month. Should the amount of time and expense (other than filing fees) involved in this representation exceed the amount of the Retainer, no further payment will be required, provided that the representation is limited to that described in this agreement. You have the right to terminate the lawyer-client relationship and discharge the Firm at any time, and You may be entitled to a refund of all or a portion of the Retainer, if the agreed-upon legal services are not provided.

You understand and acknowledge that the Retainer amount quoted herein is a reduced rate, and is based upon the agreement that the Firm will be filing a Chapter 7 bankruptcy at the same time for Your Company, Salt Water Creek Café, LLC. If the Company does not file bankruptcy at the same time, then the flat fee Retainer amount described herein will be increased to \$6,000.00.

You agree that You will perform fully and conscientiously all of the statutory duties of the debtor under the Bankruptcy Code, and that You will timely comply with all reasonable requests for information or reports requested by the chapter 7 trustee and by the United States Trustee. These duties include gathering and

Keith and Wendy Wolff  
May 8, 2019  
Page Two

reviewing all of the information necessary for filing a complete and accurate list of all of your creditors, by name and address, in the form for a matrix required by the Bankruptcy Court, a schedule of your executory contracts and unexpired leases, the statement of your financial affairs, and the statement of current income and expenses. You acknowledge that you will be required to fill out the forms required for a bankruptcy filing containing the foregoing information.

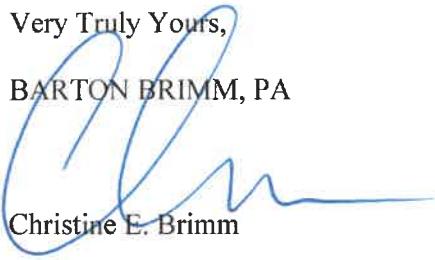
During the course of this representation, the Firm may require information, documentation or conferences and You agree to provide such information and dedicate such time as may be reasonably requested in order to facilitate maximum benefit from the representation. Firm agrees to make itself available as reasonably requested by You and to provide You with information as the representation progresses and as requested by You.

Representation pursuant to this agreement does not include representation in the following matters, which are hereby expressly excluded. In the event that You desire the Firm to represent You in the following matters, should they arise, a separate written retainer agreement will be necessary:

1. Adversary proceedings;
2. Appeals;
3. Matters involving material facts not disclosed at the time of this Retainer Agreement; and
4. Any other matters or litigation not described herein.

Very Truly Yours,

BARTON BRIMM, PA

  
Christine E. Brimm

**RETAINER AGREEMENT AGREED AND ACCEPTED:**

Keith Wolff



Keith Wolff

Date

Wendy Wolff



Wendy Wolff

Date

BARTON BRIMM, PA

  
Christine E. Brimm, Esq.

5/14/19

Date